# LECTURES
# ON
# TUBERCULOSIS

Dr. N. GHATAK, B. A.
( *Homoeopath* )

THIRD PRINT

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DR. S. M. BHATTACHARYYA
B.Sc. D. M. S. (Cal) F. P. T.

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# FOREWORD.

I am grateful to the Almighty Father that I have been able to present to the public this little Treatise—"Lectures on Tuberculosis," and at a time when it is most urgently needed. For a long time I had been cherishing the idea of publishing these Lectures, and it was mainly due to the great impetus of my dear and worthy students of the Post-Graduate Class of Homœopathy that the Lectures could see the light of the day. They deserve my sincere and heart-felt blessings.

The *developed form* of Tuberculosis is death incarnate, but there is one redeeming feature which we can take advantage of,—viz., it hardly ever comes suddenly, but only slowly and insidiously, having lurked in the human system in the *diathesis form* for a pretty good long time. I have been able to furnish those signs and symptoms from which it will be easy to detect the presence of the Tubercular susceptibility very early, so that a thorough treatment may be commenced with the view of aborting the process and warding off the development, and if by these pages I am able to wake up and set the minds of my brother Practitioners and Students, to look out for and detect the clue to the diathesis in their patients, I would think all my labours quite justified and duly rewarded. I have seen during the long years my work in the field that most cases of developed

Tuberculosis come to us at a time when it is too late to do anything save and except bringing in euthanasia, but which could have been aborted long long time before.

The book has been purposely styled in an easy language without any the least technicalities, so that the general people of even ordinary intellect and education may go through it and derive benefit, I have endeavoured high for the fulfillment of my object, but it is for the worthy Practitioners to judge how far I have been successful. I have written every word in it which only my experience has prompted me to write, and I have put in what I have myself *felt.*

If these humble pages go at least in some way to help the profession, I have not worked in vain.

124/1/1, Bowbazar street,
Calcutta } **The Author.**
The 2nd October, 1936

# LECTURES
## ON
# TUBERCULOSIS

## GENERAL OBSERVATIONS

Now-a-days, Tuberculosis has become a common disease in the country, specially in Bengal, and more specially in the big towns and their suburbs. There can be no denying the fact that diseases and disorders are springing up with so many new names, denominations, symptoms and pathologies, amongst the unfortunate people of Bengal, but Tuberculosis has, for sometime past, been doing havocs, nipping in the bud so many promising youths and beautiful girls before they are familiar with the world and its charms. Families after families have been and still are being, decimated slowly but steadily under its ravaging and destructive influence, and there is hardly anything to stand in its way. I do not mean to say that no attempts have been made up to date with the view of stopping or minimising the cases of Tuberculosis, but what I do really mean is that all the efforts in this direction have become almost abortive. Tuberculosis goes on merrily increasing and increasing, and time is not far distant when our country,

specially, Bengal, will be desolate and uninhabitable. It is high time that we, the physicians, should join our hands to do the needful in giving our poor countrymen a lead and a help in this dire need. We are highly indebted to our benign Government and the high-minded aristocracy for so much as they have done in this direction.

May I humbly speak out in the following pages what I have myself felt in course of my practice in Medicine for so many years commencing from 1899, with the hope that our suffering society may be benefitted by the principles and methods that I have myself experienced to be true and effective for the purpose? There is not any the least intention on my part, to dogmatise anything in my observations, but on the contrary, I calmly and soberly request my countrymen to verify and examine each and every particular of what I say; and in case, my observation, are found to be absolutely true and are found, as a test, to be directly appealing to their minds, they may be taken up and followed, otherwise they may be rejected forthwith.

Each and every kind of suffering must have the history of *broken Law* at its back. It is a principle which knows no failure or exception. The boundless creation is all order and harmony and there is never any the slightest disorder and confusion. All disharmony and suffering are the result of Law being broken under the promptings of the senses. We know it, the man knows it, but a *Moha,* a sort of bewilderment comes for the time being and covers up or over-shadows the

clean intellect, and the power of self-control is lost. It has been often seen that a sinner begins to repent *just after* the commission of the sin, but that is too late; for, he must have to *suffer* and there is no escape. No sort of expiation has the power of cleansing the sinning soul, except suffering, mental and physical. Repentance only puts him in the line of correction and that is all. Of course, in case he can completely dedicate himself, and everything concerning himself at the feet of the Creator, he escapes all sufferings; but, for a sinner it is an impossible feat to perform. A sinner cannot so easily persuade himself to take to that path. Be that as it may, I am not going to dwell upon these highly metaphysical matters, nor are they pertinent to our present purpose but this much is sure that all sufferings are the results of broken Law, and to avoid them, one must have to suffer, and to obey the Law, and there is no other way.

Now, if a man could *really believe* in his inner soul that broken Law *must* subject him to all sorts of sufferings, can anybody think that he would commit sin? No, people do not *really believe* so. They only put their assent to the infallibility and truth of that principle of which they hear so much, merely as a matter of habit, or as merely a compromise; but they never *believe* so. As soon as we get a clear insight into the principle of "Broken Law," and can understand, rather assimilate within ourselves, the true bearing of it, we are *saved,* because after that, our salvation is only a question of time, and our life becomes an easy and smooth sailing.

Before doing so, we must have a clear concept· of what Law is, what are its import and necessity; and then, and then only, we come in a position to choose between *breaking and observing.* It is a deeply philosophic matter, but being of utmost value, we must have to dwell upon it, at least in a few words. It is the only thing which we should have to learn if we want to make our life successful, if we want to make our life worth living; but unfortunately, this is the very thing we neglect and our University system does nob inculcate anything concerning the subject. It anything is to be learnt with our whole heart, it is the Law and Law alone. My worthy readers may, specially in these days of so-called liberty, look askance at me, and think that these things do not relate at all with our present purpose, and so these things are simply unnecessary. But I hope and pray, so that they may at last be fully convinced, and they "that came to scoff, shall remain to pray."

What, then, is the Law above referred to? It is the Law of the Universe. Law is God and God is Law. The Law that works behind each and every event of this Universe, is also working within the human system. The word "Law," must raise the question of its execution, and you spontaneously ask within yourself as to who he is that executes this Law and how does he do it. Because you see in your daily life that there is an Executive Department for the execution and upholding of the earthly or man-made Laws. But the Law I refer to is *self-executing,—* it is so perfect, so orderly and

so harmonious, that it does not stand in need of any external help for its proper execution. Suppose, there is a criminal, and he has been brought to the Magistrate for his trial. The Magistrate's mind is a clean slate, and must require evidences from both sides, the prosecutor as well as the criminal, and then be will be able to come to a decision so that he can convict or acquit the prisoner. But Natural Law does not require any evidence, but is self-executed. The Magistrate has not the capacity to go beyond his senses, but God "sees in all eyes and hears in all ears" and being omnipresent, does not stand in need of evidences. As soon as His Law is broken, the Law-breaker at once subjects himself to the sufferings and nothing more is required in shape of evidence, in order to prove his Law-breaking. Nor is there any that can save him from the sufferings.

Then question arises,—"Why do we break the Law even in case we are convinced as to the infallibility and inexorability of it?" There are the senses within us that prompt us to enjoyment; not only so, we have been, in the series of lives lived before this, habituated to run after the senses, and so we are *prone* to follow their ·promptings and their dictates, and turn a deaf ear to the Law and its biddings. Hence, the necessity of self-control and discipline enjoined by our Scriptures, to be practised from the very morning of life.

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## WHAT IS TUBERCULOSIS?

Now, let us enter into the main subject of our discourse. What is Tuberculosis? It is a *condition* of tbe human system, when a continual course of *wasting* goes on, and the daily *repair* cannot compensate it. We daily give out in shape of urine, stool, sweat, &c, and make in daily repair, and something more,—we, during the healthy condition, obtain, and keep in reserve, *much more* than we waste or give oat, and thereby our body develops and gains in tissues. Of course, there is a natural proportion of the growth and development of different tissues, and unless, we are perfectly healthy, that proportion is not found to be intact. For example, Calc. carb develops more the flesh tissue at the cost of other tissues; and there are other remedies too which make a disproportionate development of the different tissues. But in Tubercular condition, all the tissues waste down,—at least, some may not waste as the rest do but in the sum-total, there is waste and waste, and no development. This condition of the system is called the *Tubercular diathesis.*

At the very outset, I warn you against confusing between the Tubercular *diathesis* and *active* Tuberculosis. Active Tuberculosis is the *final ultimate* or the finished product of the Tubercular diathesis. The diathesis is the *possibility,* the *predisposition,* whereas the active Tuberculosis, the *ultimate product.* A man many live up to the 100th year with the diathesis quite dormant in him, and may not

manifest the active condition or the ultimation. But the active Tuberculosis is the imminent destructive condition from which there is hardly any escape. This much is sufficient for our present purpose. The rest, I mean, the immediate reason for producing the said destructive condition, its indications, its symptoms, etc, will be dealt with, later on.

How does *the diathesis* come on? There are various forms of Tubercular diatheses of different names and potentialities and you should understand them properly, otherwise you will hardly be able to take a case and hit the right remedy, i.e., one out of the typical miasmatic group. There are several terms in use, both amongst the Old School Physicians, as also amongst ourselves, which are to be carefully understood by you. Many of those terms are loosely used and so are likely to bring in a good deal of confusion in your mind. The meanings and imports of these terms must have to be definitely known by you. I am coming to them, one after another.

Those terms are the following—*Psora*, *Scrofula, Pseudo-Psora, Tuberculosis, and Consumption*; there may be a few others, but those that have just been given to you are the ones which should be explained, because they are the most important, and in general use.

**Psora**,—You know what *Psora* is. There was an attempt, during the earlier part of the Homœopathic profession, to impute all diseases and distempers to Psora and Psora alone. Of course, Psora is the primitive evil, and no body ever denies it. But it must

have always to be borne in mind that Psora can only disorder the human being by simply upsetting his *mentals* by making the mind *out-going* and *externalised* and that is all. But wherever there is found any *tangible* resulting ultimate, i.e. any manufacture which is amenable to our senses, there must be something more and other than Psora, acting behind. Nobody can deny the fact of what a tremendous influence Psora can exert upon the human organism to lead it to the destruction, but it cannot, can never, produce *tangible ultimates,* and whoever has studied the· nature and capacity of the miasms, must have to tally with us in our opinion. It is the primitive foe, the original evil which has vitiated the human mind and made it restless, seeking for the low and ugly desires to be satisfied in various directions possible, but it has not the direct influence to produce anything like Tuberculosis which is the *limiting* condition of destruction, or the finishing touch of the miasms in combination.

**Scrofula**,—Even our revered Dr. Nash has said "What is Scrofula? Scrofula is Psora and Psora is Scrofula". We bow down our head before that true and illustrious Homœopath, but cannot accept his assertion, for we know that Scrofula is something more than Psora, *It is a combination of Psora* with syphilis. This combination is sometimes called, "Pseudo Psora." Not only a combination, but a *malignant* combination of the two with hideous potentialities. Of course, *miasmatically* speaking, the Scrofula is Syphilis engrafted upon the Psoric base, but the combination is not a *passive* or a *natural* one; there is a *suppressive* method applied,

which makes the combination most dangerously powerful, rather, highly destructive. The Syphilitic miasm coming upon the Psoric base, far from being truly cured, has been mercilessly co-mingled with Psora and eternally buried into the system by virtue of powerfully suppressing drugs, viz., *Mercurius, Merc. Iod, Potassium iod,* etc, in crude doses, under the Allopathic system of drugging and suppression.

You may very well question—"How do you say so Sir?" I say so, as I have thoroughly and keenly observed in numerous cases, newly coming as Syphilitics, and the Syphilis having been suppressed in that way in them, to have been affected with glandular derangement and involvement of their lymphatic system. You will also have no doubt about it when you find occasions, more than one, for observation.

Thus Scrofula is only the *preparatory* stage of Tuberculosis, and Tuberculosis is the developed or *degenerated* stage of Scrofula.

**Pseudo-psora**,—It is a combination of Psora and Syphilis. Suppose, a Psoric individual is affected with acute Syphilis, and no true curative treatment is taken up for the purpose of curing the newly coming foe of Syphilis, the result must be a *natural* combination between the two, giving rise to a peculiar dyscrasia, named Pseudo-psora, less dangerous than Scrofula. Though essentially the two are the same, that is Scrofula, and Pseudo-Psora are, *miasmatically* speaking, the same, yet Pseudo-psora is far less dangerous, because the ruthless hands of suppression have not driven the Syphilis

to the very innermost centre of the system, as in Scrofula. In the case of Pseudo-psora, the combination is only *passive* and not so strongly drastic.

There is another point to be considered in connection with the two types of combination, viz., Pseudo-psora and Scrofula. You can, if you so intend, untie the knot of combination in Pseudo-psora, and cure the Syphilitic miasm, but in Scrofula, no such thing is possible, because in the latters a complete fusion between the two miasms has already been brought about, and a *new* thing, a *new* dyscrasia, has been formed partaking the characteristics of both as well as something altogether *new* and *destructive* which did not reside in either, has been brought forth. Before attempts are made, in the way of curing a particular miasm in combination with some other miasm or miasms, you must have to untie the knot, and bring out each as a separate entity. Here, in Scrofula that is not possible, because the combination, or rather the fusion, is so complete that altogether a new entity has been created, and no relics are there of the two old miasms.

**Tuberculosis**,—If you want a definition of Tuberculosis in one short sentence, I will tell you thus,— "Syphilis in the father is Tuberculosis in the son." The inherited tertiary stage of Syphilis is Tuberculosis. The true Tuberculosis has generally three stages, viz., (1) premonitory, (2) passive and (3) destructive. These stages shall be dealt with later on. Here, you ought to know what is Tuberculosis. It is a dyscrasia produced from the complete fusion, through heredity,

of Syphilis and Psora. Let these two miasms co-mingle in the father and let it be transmitted to the son, and the son will have the most dangerous dyscrasia named Tuberculosis.

**Consumption**,—It is a half-brother to Tuberculosis. Here also the dyscrasia is highly destructive, the only difference being that in Tuberculosis there is *decomposition* in the degenerative stage, but in consumption there is no decomposition, but a continued process of *dryness, wasting and atrophy* continued up to the last scene of the unfortunate patient. The reason behind this difference is that in Consumption Sycotic element predominates instead of Syphilitic, i.e., Consumption arises from the malignant combination, through suppression, of Psora and Sycosis, either self-acquired or inherited, though mostly the latter.

There are many disorders in childhood, under various names, viz. *tabes mesenterica,* rickets, struma, mal-growths, hydrocephaloid head, abnormalities of growth regarding body and mind, etc, etc, that are to be traced from bad heredity. Any disorder in childhood must have its reason in the parents, because nothing can be self-acquired at such a tender age. These shall be considered in future chapters.

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## CAUSE,—TRUE AND EXCITING

The true cause of a disease-symptom of any name and denomination is the disordered Life-force. Everywhere it is the disturbed Life-force which stands as the true cause. The Life-force is unable, for some reason, to work as it has been doing all along, and hence the malady. This inability to work in a natural or healthy way is due to the presence of some other inimical force acting along with the Vital Force. The inimical force is the result of broken Law. Hence a disease is a sin-process. Law is broken and the sin-process commences.

Tuberculosis, the direst of the destructive agents, is the result of double sin, and is a death-dealing *process.* It comes from the blending of Psora and Syphilis; ordinary passive blending is Pseudo-psora, and active and forcible blending brought about by suppression is Scrofula, and the fusion of the two under the hereditary process is what is called Tuberculosis. Psora and Syphilis blended in the father and fused down through heredity reaches the son in the form of Tuberculosis. I have already explained the other terms and I need not dwell upon them here to show any distinction of Tuberculosis from them.

That is the true cause from the *physical* stand-point. But there is a *metaphysical* consideration

which may not be necessary for you to know, so far as the physician's duties are concerned, but metaphysically speaking, there is something that stands behind the true cause. Suppose, a father contracts Syphilis and begets a son. The son must have Tuberculosis, though without any the least fault of his own. The father commits the sin, but the son suffers. How is it? The universal Law dictates that he who sins must suffer. But here the son commits no sin. He suffers for the sin of his father,—and this is quite unnatural and unreasonable too. Where is the true solution?—one might ask.

The solution is this. The son must have committed sins so as to deserve these sufferings, and his taking birth from the sinning father is only necessary, so that the son may have the fit *field* and proper *occasion* for the suffering he richly deserves. As a matter of fact, it is the son that *selects* his parents, good or bad, in accordance with his commission of deeds, good or bad, in the past life. The law of affinity works here. So the son suffers, *not for* the sin of the father, but for the sin committed by *his own self* in his past life, the father only fulfills the occasion and opportunity and that is all. But we are not concerned with the metaphysical side of the matter.

Now, let us look upon the true cause and the disease which is its effect, as something crude, because they are not *crude*; but each of those two is *dynamic.* What is inherited is dynamic· and what is newly formed in the Tubercular subject is also

dynamic. Tuberculosis is the dyscrasia, and the symptoms and conditions are only the results of that dyscrasia. Those results and conditions are *crude* expressions of the *dynamic* dyscrasia. Then come in the Exciting cause or causes, which produce the crude expressions. The true cause gives the *soil and predisposition* and the exciting cause or causes help to produce the crude manifestations.

**Exciting Cause or Causes**,—The exciting cause has the capacity of waking up the foe slumbering within the system, but the true cause and the exciting cause are *interdependent* upon each other. By this, I mean, that if only the true cause is there but no exciting cause, there is no chance of any active manifestation, as also if there is the exciting cause only, but no true cause, in that case. Nothing being there to be waked up, no manifestation can take place. So both the causes are so absolutely necessary in order to create a disease course. Suppose, two persons expose themselves to a cold blast, one may wholly ward it off and will not be affected at all, whereas the other, having the Tubercular predisposition in him, will. be down with illness. Both of them were exposed to the same exciting cause, but the former individual having had no dyscrasia in him, the exciting cause, I mean, the exposure, will fall flat on him. Whereas the latter may have a. very serious disorder coming upon him so as to even put him to death.

You will see that attempts have always been and still are being made to make the exciting cause *solely*

responsible for bringing about Tuberculosis. Those that attempt doing so, are wrong in more ways than one. The fundamental error is that they do not at all consider the Law-breaking and the sin-process that follow it. They seem to proclaim that nothing stands behind the sufferings of man. Can you ever imagine that an individual suffers for no fault of his own? Can anything arise upon nothing? Can you ever assert that a man suffers without any cause within himself? An exciting cause or dyscrasia or a wrong dynamis, and the latter presupposes Law-breaking or disobedience to Law. They unreasonably and senselessly accuse many outside things and conditions to be wholly responsible, which are, as a matter of fact, so many innocent factors, Wherever there is any suffering, the suffering individual must be wholly responsible. None has to suffer for somebody else's wrong. Any suffering must presuppose disobedience to Law, and the Law-breaker must have to suffer, and there is no escape,—that is the Law.

The cold east wind may be highly refreshing and salubrious for a healthy man but the same wind produces various disease-symptoms in a miasmatic individual. So, there is nothing good or bad in the *things* of Nature, but it is the *condition* of man or his system which proves them to be health-giving or disease-producing. Hence the external objects which are made scape-goats by the Old School, are quite innocent, but they produce diseases only in them that have the true cause. I mean, the susceptibility, and the exciting cause are quite innocent so long as there is no miasm or the disease-producing

susceptibility in the system; and when there is the susceptibility lurking in the system, a very puff of cold winds may prove to be injurious, and may work as a disease-producing agent.

Then, you should very clearly understand the disease-producing value of the so-called *bacteria and microbes,* the microscopic innocent *creatures* in nature. The Old School physicians make a great fuss about them and they are said to be the "true cause" of diseases, each disease having its own kind and species. First of all, it is most ungodly to think that the Giver of all good should create these small insects to do havoc amongst His other created animals, specially human beings, the highest of His creations! No evil can come from Him Who is all good,—we really suffer for our own mis-deeds, but to make Him responsible as being the Creator of those little animal-cules which, according to them, are so many disease-producing agents, is the highest and worst form of blasphemy on earth! Then, ask your reason and your observation. Do you ever see that a fruit gets decomposed *because* the germs are found in it, or it gets decomposed *therefore* the germs are there? Decomposition comes first and *then* the germs are found, because they are *necessary* there. They do the work of scavengers and eat away the decomposed portions. They come just in pursuance of the natural law, not as foes of human beings, but rather as friends. They are absolutely innocent agents. Far from being disease-*producing agents,* they are rather the *product* of the disease process, when death and decomposition of some parts

of the organism appear in course of that process. The theory is highly *unreasonable* and *unnatural.* Let them be crazy over it, and let them search and research and run about destroying those poor insects.

One thing you must have to note. The cause, of whatever it may be, is always *immaterial* and *dynamic* and never *crude,* Anything visible in the creation is the *result,* the *manufacture,* or the ultimate, and can never be the *cause,* I mean, the *true cause.* The cause is never *material,* it is always *dynamic.* A system, vitiated by miasm, manufactures something, and this something is not healthy, and not natural; and this something that comes in as a result of *mal*-working of the organism, *appears* as the cause, but, in fact, it is one of the links in the process of mal-working and mal-functioning. Wherever there is anything visible or crude, there must be something dynamic behind it to produce it. It cannot come *of itself,—it* must be *produced.* Just go on tracing on-wards in the upward direction, and you will find the invisible *esse* as the *prime cause.* Just see the thing and ponder over the matter reasonably and deeply. A child has worms and it is irritated and full of abnormal cravings. Do you think that these worms are the *cause* of its bad temper and abnormal cravings? There must be something behind the worms,—the worms, the bad temper and the abnormal cravings, etc, are merely the *productions.* There is a mal-working, a *mal*-functioning of the organs in the system, and those are merely the manufactures of that *mal*-working. Had

the child been *healthy,* there would not have been any mal-working or mal-functioning of its organs, and so the worms, would not have been manufactured at all. So, the conclusion must be, that *because* the child is unhealthy, *therefore* it manufactures worms, and *not because* there are worms, *therefore* he is unhealthy. To conclude that *because* there are worms found in the child's stools, *therefore* the worms must be the cause of his illness,—is worse than non-sense, and is just putting the cart before the horse.

Just see what happens before any disease manifests its symptoms. First of all, there is a sin-process starting from the Law-breaking. Due to the Law-breaking, the Vital Force working in the system, is compelled to work under the sway of some other force which is inimical to the natural force. This unnatural working of the Vital Force under the sway of another force is really the *disease.* Now when the Tubercular diathesis is inherited, a Tubercular process of vital *mal*-work sets in and continues, unless and until, in course of time, a particular spot is selected for its manifestation, viz., the lungs, the brain, the intestines, the bones or any of the other tissues in the system. In case, the lung tissue is affected, ulceration commences, and when it is far advanced, decomposition must be the ultimate condition. Small worms are manufactured there, in pursuance of Natural Law, as you find worms in the decomposed fruits. These worms or germs, or microbes or bacteria, whatever you may call them,

are really the *result* of the disease-process, and never *the cause.*

They call a condition to be Tuberculosis, *only when* they get what they declare to be T. B. bacilli from microscopic examination, *and not before.* But just clear up your position and the true state of the case. The actual manifestations generally appear long, long after,—it is at the *final* stage of the Tubercular process in a patient. The patient is Tubercular *long long before* the time when those manifestations appear. Suppose, a person is very much susceptible to cold, gets frequent attacks of cold and coryza, is very much irritable, has no satisfaction nor peace in his mind, and is therefore cosmopolitan regarding everything concerning his own self, etc, etc,—you will generally conclude that the Tubercular *diathesis* must be there in him, and if you enquire, you will find some thing from acquisition or inheritance, which will confirm your opinion. Suppose also that the individual is in his teens. If you care to cure him at this very stage, you will just save him, and in fact, abort the future developments or cut short the disease process. But if the disease-process is allowed to continue on and on, the slow fever, the irritating and constant cough, exhaustion, emaciation, etc, etc, will appear. Wonder of wonders is that even at this stage, the Old School will not definitely declare the patient to be Tubercular. However, if still neglected or a suppressive treatment is followed, it is sure that a cavity will be formed in the lung tissue and a certain class of microbes will appear in the ulcerated portions of the

lungs, which may come out with the sputum raised by the patient. *Then and then only,* they will exclaim—"Oh, here is a T. B. Bacilli in his sputum". · They will advise series of injections out of their streptotyped Calcium preparations, "the panacea for T. B.", unless and until death closes the scene. The good doctor and the patient's family will, of course, get the hackneyed consolation—"Oh, we have done what we could do, but it was so ordained that the patient must die, and so what could we do? etc, etc." You know, it is the nature of the Old School treatment to do away with the crude and *resulting* manifestations which, according to them, are only the disease proper. The offensive sputum, the slow fever, the night-sweat, etc, etc, they call "Tuberculosis", and they try to remove those crude manifestations but they *must* fail, because those are the *results* of the *real disease* and not the *disease itself* which they cannot touch.

Now, what is the *true cause* of Tuberculosis,—let us see and understand. We shall now dwell on the true cause of Tuberculosis. Though I have already given you in a nut-shell as to what is the *true cause* of Tuberculosis, yet I want to give it to you in plain details, so that the thing may be once for all imprinted on your mind and you may act accordingly during the treatment,—preventive and curative,—-of this dire death-dealing malady.

Clearly understand and eternally impress upon your memory that every disease is a sin-process and

must have at the back, the history of Law breaking. Tuberculosis is the Syphilis in the father, and when this Syphilitic miasm comes down in the tertiary stage in the son, that son is born with the Tubercular diathesis in him, and this diathesis lives in his system in a dormant condition only awaiting the exciting cause or causes for its manifestation. The son is born with the seed in him, which germinates into the plant growing in him as the diathesis, and when the exciting cause or causes are supplied, the full-grown tree commences to bear the fruit which is the *active* or *manifested* tuberculosis. Regarding the different conditions and stages, as also the most favourable time for the cure, I shall give you all details in a later Chapter. For the present, I shall confine myself to the cause, I mean, the True Cause.

Now, a question may arise in your mind as to why a son should suffer for the sin of his father? If you think deeply, you will understand that the son has to suffer for *his own* sin, and not for the father's. The son has already committed such a sin or sins for which he must have to suffer and he selects his own parents so that he may get the fit soil for his suffering he richly deserves. You know, a man obtains everything in this life which be deserves in accordance with the deeds done by him in his past life or lives. It may appear rather queer for the materialistic minds, but this is absolutely true. The real fact is that the son has to suffer for his own deeds, good, bad or indifferent,—the parents or other environments only

supply the soil and occasion for the suffering. The Syphilitic rather gets his own suffering for his own sins and the son also suffers for his own. This is quite in accordance with the Law of Nature and is up to the universal order and justice.

However, the son is born with the seed-dyscrasia, and I shall deal with the condition and development that comes in later on. I am going to deal with the method of prevention in the early age, if possible, in the next Chapter.

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## EARLY PREVENTION

You will readily realise that the Tubercular dyscrasia is mostly *inherited,* and is seldom *acquired.* Cases are rare where Tubercular process commences in one's own life independent of inheritances. But by virtue of the suppressive methods of treatment prevailing in the country for a long time past, cases have been observed in which, individuals born with rather a low vitality, have acquired venereal diseases and got them suppressed, with the result that a consumptive process or even a lung-phthisis has set in their own life. In any case, this is, of course, a rare occurrence.

Now, be the process inherited or acquired, it is important to detect the very first indications of the process and to be able to cut off the process and cure the individual as early as possible,—because earlier it is done, better for the patient. At least, it must be done *before* the on-coming of any *ultimate.* To prevent Tubercular developments in those rare *acquired* cases, is not so much difficult as to do in *inherited* cases.

In the *acquired* cases, you are only to do away with the effects of suppression, so that the suppressed symptoms may *re-appear,* and thus the knot is untied and the case simplified. You are only to make a record of each case, and follow the methods of anti-psoric treatment, as in ordinary chronic cases. But the

*inherited* cases present a good deal of difficulty, as you are to find many *masked* things and symptoms which have not yet taken a definite shape. and form so as to develop into clear-cut symptoms to hold on. A deep insight into the human nature and an absolute accuracy of observation are necessary for the purpose.

The *inherited* cases present only very faint traces of the parents' miasmatic condition in which the conception took place. The miasms get a complete fusion or perfect co-mingling when they come through the heritage, and it is not simply a mechanical form of mixture. The Syphilis and Psora in the parents' organisms unite together and give rise to an altogether new thing of more vicious tendencies and deeper potentialities which we find only in Tuberculosis and in no other.

I can cite for you a long list of *acquired* cases in which, by virtue of a continued process of suppression, Tubercular symptoms appeared and most of those cases I could cure, though with a good deal of difficulty and after a careful anti-Psoric and anti-Syphilitic treatment. There is one redeeming feature that is generally found in these cases, and which is that the patients having had a fair trial with the Allopathic mode of so-called treatment, are patient enough and so they do not flee away easily, as other ordinary patients do. I remember one case, and that of a Deputy Magistrate, in which Tubercular developments were forcibly brought by the most senseless, cruel and irrational method of subjecting the unfortunate gentleman to several series of Injections

for a long period of more than ten years, though it was all along clear even to the dullest man in the world that far from improving in any way, the case was going down and down. Now when there appeared bloody sputum and a low type fever with emaciation, the poor patient could not be persuaded any longer with any amount of coaxing and cajoling with the help of learned phraseologies, and he came up to me for treatment. Through His mercy I could bring him round, with the help of a long continued careful treatment, and after which his wife and daughters were also brought under my care. The Deputy Magistrate being an educated man, could be fully convinced of the truly scientific nature of the Homœopathic method and the high-handed silliness of the Allopathic mode.

In the *inherited* cases, for the purpose of *prevention* of the on-coming of Tubercular developments, the one grand principle is,—prevent *as early* as you can. Here the benign nature of our mother Prakriti is so manifest, that you cannot miss to notice Her efforts for helping you in the way, unless you are hopelessly blunt and blind. The dame Mother is always for multiplying, preserving and beautifying, Her creation and therefore hurries up in every case to supply you with the guides and symptoms, and you are only to look up and hunt for them with ordinary care, and that is all.

In the *acquired* cases that threaten to take the Tubercular turn, the *acquired* miasms must have to be brought into their original manifestations. The

Syphilitic Chancre or the Sycotic Gonorrhœa must have to be *re-produced* in their *original* forms, and this ought bo. be the *principle* for the physicians' guidance. As soon as one of them appears, the whole case gets simplified, and the onward course of the Tubercular miasm is cut short and stopped. But in *inherited* cases, no such *original* manifestation is to be expected, as the original attack was not in the patient himself but in his parents, and so the retrograde process, under which the original and suppressed manifestations appear, cannot bring back what did not appear at all in his body but in the body of his ancestor. Still symptoms of other nature and type will show that the miasmatic knot has been untied and the case is being simplified on and on.

In any case, *the totality of symptoms is the only guide for a prescription* and treatment. Cases are not rare where all the miasms are found to combine in the system; but here, only one of the miasms is found to be *active* and producing symptoms; those symptoms will guide, though they may relate to only one out of so many miasms present in the system. It is quite natural that only one miasm is active for the time and the other or the others must remain dormant. When the remedy upon the totality of symptoms produced by the active miasm is administered, the result is that, in proportion the active miasm is cured, the dormant ones awaken and commence to produce symptoms. Thus you are to go on prescribing on the picture drawn upon the patient by the active miasm for the time. By and

by, a time comes when there are no symptoms to be found in the patient. "Hands off" is the rule to be observed when that predicament appears. After some time, it may again be found that some of the miasms has commenced to produce symptoms though *very faintly.* If a prescription is possible upon them, well and good, if not, nothing should be given, and it will be seen that they will wear off by and by, leaving the patient quite all right. It is a patent fact to be seen in these cases that after one or two prescriptions, the Tubercular course is cut off, even long long before the patient is perfectly cured of his full miasmatic disorders.

Patients that *inherit* the miasms of Syphilis and Sycosis, and are thus likely to take the Tubercular course in their grown-up period of life, are found to develop in an early age, many of the disorders named, Infantile Liver, *Tabes mesenterica,* Tonsilitis, Adenoid growths and other disorders of the Lymphatic and the general glandular system, general disproportionate developments of both body and mind, etc, etc which are so numerous to mention and which are so commonly found amongst the children of our now-a-days society. These disorders are not generally given proper value on, and not viewed with the perspective eye of a true healer, by the Old School physician, but are looked upon as so many *local* diseases. For example, where there is a general emaciation in the children, the patients are advised to rub cod-liver oil in sufficient quantities over the body;

where there are Adenoid growths, they are pruned with knives; or, where there is *Tabes mesenterica* they are advised to thrust a good deal of nourishing diets, etc, etc. It is a wonder that though they are so many learned and highly cultured physicians, they do not seem to understand or detect the *real* defects in the children. They emaciate, *not because* the food-stuffs that are supplied to them, lack in nourishing properties, *but because,* they are quite *unable to assimilate* nourishment from those stuffs. Those august Physicians do not care to observe that other children in the family fully and naturally grow up with the self-same food-stuffs, whereas the affected one loses all the while. The defect lies in the child's lack of assimilating power, and not in the food-stuffs or their nourishing properties. Even fresh air and pure water can develop, in a healthy and natural way, those that are free from miasm. The child famishes owing to his own defect. This is a truth, most palpable truth, but still the physicians will go on quarrelling with the externals but would never think of correcting the child's inherent defect. At last, when all those wise directions fail, as they *must,* they would advise a change of Climate, as a last resort, but the result is only a palliation at the highest and nothing more,

I remember, one sincere and highly learned physician of the Old School was really out-witted to find that his patient was a voracious eater, yet he was persistently wearing out, so much so, that he

was only a skin and bone, a mere skeleton. The gentleman made laborious searches and re-searches about the pathology and the patient's diets, but in vain. Quite exasperated, he gave over the case to me and wondered to see that three small doses of Iodine put the patient into a fair way towards recovery, and in fact, only a single dose of Lyco, finished the case. He had fought for two long years for nothing. Not only so, he said, "I cannot persuade my mind to believe that such tiny pills can produce such a tremendous change, etc." I fully convinced him about the *principle* of disease and its cure, and ere long the sincere gentleman came over to Homœopathy. Now he is a Homœopathic stalwart, so to say.

The disorder, in every case, is to be sought for *within* the organism itself and nothing *external* can do any good whatever, unless the Vital Principle co-operates. There is a Law which must have to be satisfied if co-operation is needed.

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## TUBERCULOSIS,—DORMANT AND DEVELOPED

The most favourable time for curing Tuberculosis is during the *dormant* condition, and the well-meaning physician must try his utmost to cut short and abort the onward course of this devastating disease-process. So there must be a clear conception of the symptoms and condition in the patient ·during this time, so that he can, with unerring precision, detect the presence of the process, and do the needful to save him. The point is, that according to the teachings of the Allopathic system, Tuberculosis is never declared until it is too late. The worthy physicians of that School will see nothing wrong in the patient during the time when Tuberculosis is dormantly working in his system, but will declare "T.B," only when they will actually detect "microbes or bacteria" in the sputum raised by the patients, which means the developed condition of Tuberculosis in the form of cavity or ulceration in the lungs, that is, a stage in which the chance of cure is highly problematic or is rather too far to entertain. Unless the disease is in the resultant or ultimated stage, they will not stir or prescribe any treatment worth the name save and except thrusting of *nourishing* diets,

patent medicines, etc, with the view of *toning* up the patient; but they do not understand at all that *the force* that is at the bottom of nourishment and growth, is in disorder and so the *thrusting* method is worse than useless. It is the Vital Force which is in disorder and that is the reason why his organs do not function properly and the patient is unable to assimilate the food-stuffs though the self-same foodstuffs are found to produce good and natural nourishment and growth to the other members of the same family, because they have their life-force in natural order and so harmonious working and functioning of their systems are going on.

Owing to the above type of senseless teaching, the public do not think it worth their while to take proper care of the children or members of the family who have got the Tubercular process in them going on in a dormant way. Even if the family physician directs the attention of the head of the family upon a particular child or member in the family who might be in the dormant stage of Tuberculosis, he will generally look askance and will impute selfish motives to the good-meaning physician. I have during my practice, come across such cases which might have been cured and the on-ward course of the fell disease might have been cut short and warded off long long ago, had the father or guardian of the patient acted according to the timely warning of the physician. I, therefore, feel it a necessity to put in a few symptoms and conditions here which must act as a guide for both the family as well as the

physician. Where one or two of the following will be found, they should be taken as a warning, and timely arrangements for proper treatment should be adopted.

**(1) Mentals**,—The very first impression is made upon the mental plane by the Tubercular taint in the form of *fear, apprehension, timidity* and high grade of *irritability*. Sadness or gloominess is also found to be a feature, yet timidity and irritability are the main points to be noted. There are a few qualifications of those two mental conditions, viz., that the timidity relates to dogs specially, as also to other animals and that the irritability specially aggravates after breaking-up of or waking from sleep. The patient cannot be satisfied for some time after sleep. This timidity and irritability are found to come in very early in Tubercular systems, as indications of the presence of the taint.

There is found a *third* feature in the mental condition of the Tubercular patient during the dormant state, which is technically called *cosmopolitanism,* meaning *restlessness with dissatisfaction* with places, circumstances, companions, conditions, with anything and everything concerning his own self. This is a very important feature and should be borne in mind. He cannot rest satisfied with anything for any length of time.

Then comes the next feature, *the difficulty of concentration* on a thing for any ordinary length of time, and he will be constantly changing from one subject to another. If he goes to a place for a

change, he wants to change from there to another place, and so on. His mind will be found to be *roaming* all the while.

Last, though not the least, is the *mental exhaustion* and hence an *apathy,* or rather, *a dread for work.* This exhaustion seems to come first in the mind, and then it is slowly transmitted to the physical sphere. His mind first gives way and then his body or muscles.

*Depression* and brooding attitude, of course, qualify all the above features, in a considerable degree. In some cases, it has also been found that even a desire for death is manifested.

*It must be remembered that in a true Tubercular patient, *a fear for death is hardly to be found.* Rather *a hopeful mood* with a dauntless or a defiant attitude is observed. I have seen in many patients, even in the fully developed stage of their Tubercular disease, a stage when the death is well nigh at hand, yet they do not care at all for the coming end. They seem to be quite callous as to their serious condition.

**(2) Physicals**,—The most characteristic physical is the constant *tendency or the dire susceptibility to take cold,* the patient without knowing how and where he takes cold. As soon as one attack of cold and coryza ends, another comes in and so on.

A good appetite, rather *a voracious appetite, yet constantly and slowly losing all the time.* Emaciation is a physical feature which stands much prominent in the dormant stage of Tubercular patients.

Eating well but emaciating gradually. Of course, in some patients, there is found *a disorderly* or a *partial* growth or development, but the most characteristic feature is emaciation in spite of good eating, even a voracious eating.

*Precocity* has been, in many cases, found and observed as a feature during early periods of life of the Tubercular patients. Even prodigies have been found to be the results of Tubercular inheritances. There were many brightest jewels of our University who showed so much wonderful results, only due to Tubercular inheritances, and who died, in their middle age, of developed Tuberculosis.

**Vagaries of Circulation**,—Tuberculosis in its dormant condition unmistakably shows its presence by many symptoms indicating disorders of blood circulation. *Nose-bleed* is a frequent occurrence on even the slightest provocation. Then, a peculiar symptom of *flushing,* i.e., a discomforting feeling as if the whole amount of blood courses upwards, . and . the feeling ending in a sweat, more or less, on the forehead and face. *Menses* of the girl women are a regular trial for them. Before, during and after the menses various troubles are found. The flow is bright and dark red, profuse and mostly fetid. Leucorrhœic flows are also of that nature. Neuralgias, headaches, pains in the back, general malaise etc are the order at the time. Moreover, there is a sure tendency of ulcerating, the discharge being almost always excoriating. All these symptoms and peculiarities show that there is always a great

disorder of circulation in these patients. *Palpitation,* specially on ascending even a few steps, is a sure indication of dormant Tuberculosis.

*Discharges* are profuse, fetid and exhaustive, as in the menses, diarrhœa and pus. The natural discharges in human systems are generally constructive in their natural condition, but during dormant Tuberculosis, they are never laudable and must always be destructive in their tendency. Nocturnal enuresis, nocturnal pollutions are frequently found in this condition. I have seen, night pollutions hasten the tubercular process and bring about the active Tuberculosis within a short time. Salivation,—profuse and fetid, more often manifested in the early life, with enuresis of fetid, pungent and profuse character unmistakably ensures the presence of dormant Tuberculosis, as those things show Syphilitic inheritances in the children, Profuse and fetid, as also pungent, sweat is a feature of dormant tubercular feature, and as it does not bring in a relief of the patient in any way, it is a sure sign of paternal Syphilis which has been inherited by the child as the tubercular diathesis, though lying in him in a dormant condition.

**Glandular derangements**,—Enlargements of glands, specially, of the maxillary regions, show from the earliest childhood, the tubercular diathesis, and can very early draw the attention of the family physician as to the presence of the dormant foe. Tonsillitis and formations of adenoids in the throat are a frequent occurrence in these children. *Salivation*

and *pungent sweat* are general accompaniments. Even if these two accompaniments are absent, *a continued wasting* of the children in spite of good and nourishing food-stuffs, must arrest the attention of the guardians or physicians as to the fact that there must be something wrong, within. Frequency of multifarious disease symptoms, during childhood, affecting one organ after another, and their *obstinate and persistent* nature, should also be noted as indicating the dormant tubercular miasm in the system. These children are never well. The doctors say that the child gets coryza due to its "catching cold", but why the particular child catches frequent cold, they cannot satisfactorily explain. The point is that the resisting power of its Vital Force has been deranged,—in other words,. it has got the peculiar susceptibility to be attacked by any and every disease, viz., cold and coryza, diarrhœa. fever, nose-bleed, pneumonia and other disease of the breathing apparatuses, etc. This type of child is always a very poor-breather,—it cannot even take a full breath. As it is unable to defend itself from wind and rain, a sort of timidity slowly comes in within him, so that it begins to be afraid of its own shadow. I have seen· that the dentition of this child is a regular trial for them, as it has to suffer from various disease-symptoms of various organs in a persistent way. Even diseases of unmanageable nature visit the child, and unless careful treatment is followed, many succumb at the time.

A frequency of Pneumonia, Broncho-pneumonia, Bronchitis is generally found in the dormant condition. Not only so, if Allopathic treatment is adopted during any attack of Pneumonia, etc, it is generally found that it helps the development of Tuberculosis, because that treatment is a form of suppression. Tubercular systems . are specially susceptible to those attacks, and cold and coryza.

**Condition of nails** may also show signs of the dormant miasm. Nails are found to split, to be corrugated and spotted, though I have not seen these indications to appear in the very childhood; but in adult age, they are invariable signs of dormant Tuberculosis.

**Desires and Aversions**,—There are a few peculiarities to be found in the tubercular patients with regard to their likes and dislikes. It is very much important to know that these patients avoid cold and cold air, and try to keep themselves in warmth and within closed doors. They seem to shrink from the cold and cold air. It is also important to know that they always want to roam about and never to rest in one place,—they are full of *changefulness.* Little boys of tubercular type are to be found moving and running hither and thither, cannot be satisfied with one continued course of action,—change change and change. Suppose they are at their study, they cannot keep their minds on any particular book or any particular subject for a long time,—they must change subjects. Then after a small time, they will rise up and move about, without any the

least reason for such movements, save and except their desire for a change. Regarding items of food, they are found to be very fond of *meat,* potatoes, ghee, salt and fat. They rather abhor to take sweets. Of course, there may be a rare exception where sweets may be taken, but in a general way, it is not very likely that would wish for sweets. *Milk* is a thing which they positively dislike, nor can they assimilate. it. They are to be coaxed and cajoled; in case they are to be given milk-diet during any protracted type of acute illness.

The above points and particulars, if carefully remembered, may give a timely notice to the attending physician, so that he may do the needful to cut off the tubercular course and abort the on-coming of tubercular developments. One thing which is to be borne in mind by the well-meaning physician and that is - "Never think of *suppressing* any the least disease-symptom in a system in which there is a tubercular diathesis lying dormant." Any form of suppression, however trivial, for example, use of compresses over an inflammatory process, say, an abscess or a boil, or an operation which would not have been necessary at all, had the symptomatic remedy been used, or an external application over skin diseases of any kind, etc, etc has the invariable effect of rousing up the dormant foe from its slumbering condition, and laying the foundation-stone of tubercular manifestation in some of the internal organs of the system. Tonsil-operation, Piles-removal, and many other senseless operations are the order

of the day, and the rich people resort to them as a matter of fashion, without knowing the baneful, rather, the destructive effect of such things. The enlarged tonsils are the *results* of a tubercular process, they are not the *disease,* and so when they are removed, the influx is upset, with the result that some more internal organ must be made the seat of tubercular development. *Beware of suppressions.* Always try to *cure* under the Law of Similars or step aside,—Nature will ere long give you her helping hands by supplying you with the symptom totality to proceed for a true cure,—just wait.

The developed condition of tubercular miasm is said to be the "Tuberculosis" by the dominant School of Medicine, and in fact, unless they can detect and find out T. B. Bacilli in the patient's discharges, they are not at all inclined to call it a case of Tuberculosis. But as soon as they find a certain kind of microbes, technically called T. B. Bacilli, they will declare the case to be that of Tuberculosis. They will then, push on with their specific Injections, which is the only mode of their treatment.

Before coming upon the developed condition of this dire miasm, we must have always to remember that, "the more the development, the less the chance of cure." Why? Because, the more the development, the less the *prescriptive* symptoms to rely upon, and the more the *common* symptoms of the *disease.* During the full development stage of Tuberculosis, only the painful, *disease*-symptoms stand bold and clear, the patient's *individual* symptoms that are necessary for the

selection of the curative remedy are found absent.

The developed or the manifested condition of Tubercular diathesis means that the Disease Force has already selected a spot of attack and pitched its tent there, in order to lead the patient to destruction and death. A word or two for explanation may be needed here.

So long as the miasm was in the dormant condition, it was in the finest form of *susceptibility* only; in other words, it was only a *disturbance* in the Vitality. It was simply a *possibility,* ready to be fructified as soon as an exciting cause or causes may be had. That susceptibility is like *a seed,* the germination, and further growth and development depending on the supply of air, light. water, sunrays etc. So the seed of developed Tuberculosis was so long lying dormant within the system, only awaiting the exciting cause or causes for localisation and development. Here, the truly philosophic students of Homœopathy will be able to understand that as the seed has an earnest desire without itself to fructify so the tubercular susceptibility has the peculiar propensity for its development and where there is the susceptibility, there is never any want of the exciting cause. Here I am tempted to quote, from one of my Books, named "Chronic miasms and remedies to meet them," a few lines, in order to show the relation between the True cause, the susceptibility and the Exciting Cause (Vide, pp. 177 and 178 of the Book).

"The exciting cause is what ‘excites’ the slum-

bering foe, the dormant miasm lying within an individual. So long as the exciting circumstances or exciting cause does not appear, the dormant condition of the miasm is not disturbed, and the real cause or the true cause does not and cannot act, that is, produce a disease. An exciting cause is also a *necessary* incident in producing a disease. An exciting cause cannot be a disease-producer, *unless* the true cause is there,—similarly, the true came also cannot bring about a disease unless and until an exciting cause helps. But you are to note one thing which I have tried to explain in connection with the true cause, that there is a relation between the True Cause and the Exciting Cause. This relation is highly philosophic, and you may have to strain yourself much in order to understand it. The True Cause has a *potentiality* within itself to find and meet the exciting cause, so that the exciting cause lies in the womb of the true cause. This is in accordance with the Law of Nature. For instance, you will see that as soon as a seed of a particular fruit-tree is thrown upon the earth, the seed has never to be anxious about the wind, light, water, etc for its growth and development,—they will all come, in pursuance of the eternal Law of Nature, for its help and onward growth and development up to the point of fructification. It is the lookout of Nature, as it were, to see that every seed, or every real cause must bear fruit, so that a regular supply of the requirements, which are of the nature of an exciting cause, must be arranged by Nature Herself. You

know, if a disciple really feels a strong desire for his spiritual development, he has not to be at all anxious for his guide, as the guide will not be wanting at all but will necessarily appear before him and really urge him for his initiation. You might have seen it in the lives of many great personages and *Avatars* like Shri Ramakrishna Dev and others. Thus, the real or true cause contains within itself the exciting cause."

Under the above circumstances, it is quite clear that Tuberculosis must have to be cured during its dormant condition in the human system, because that is the most opportune time for the purpose. Why? The reason is that during its dormant condition, a full picture of the patient, a constitutional totality may easily be obtained, and that totality cannot be had during the full developed condition. During the developed condition, the said totality may sometimes be obtained in the initial stage, and in proportion that stage advances, it goes on fading and fading, so that during the full developed condition, it is altogether absent, only the *disease*-symptoms or *local* symptoms stand bold in this fore-front, which are quite useless for a prescription. So that the principle stands— "The more the development, the less the chance of cure."

A few words, before I embark upon the discourses in relation to the developed condition of Tuberculosis, should be necessary with regard to the *course* of the disease under consideration. In some cases, the course is so rapid, that it is said to be *galloping.* In a few others, again, it is awfully *delayed,* and there

is an ample time for treatment that is possible still. Generally speaking, the course is ordinary as in other cases of disease. The *reason* behind the difference of rapidity is not always capable of being definitely fixed, but it is sure that reason in every case, lies *within* the system affected and never outside.

## DEVELOPMENT STAGE

I have already said that the development of Tuberculosis comes in when the *exciting* cause or causes rouse up the slumbering foe, and develop the symptoms in the external sphere. Now, the spot of manifestation depends upon something which should be considered. By this, I mean, the reason why different people have different manifesting spots is worth considering. I shall come to it later on.

According to the popular idea, the lung-phthisis is the only form of Tuberculosis, but that is a mistake. It is only *one* of the so many forms that are found amongst the Tubercular patients in our country. The following are the forms of Tubercular manifestation and their names are given according to spots manifested in.

(1) Lungs are the main spots which are generally attacked and in the case, *phthisis* is the *name* given. This is the most common form of manifestation that we see in our society.

(2) Another type of manifestation takes place in the stomach or intestines, either in the form of an ulcer or of a fixed and continued catarrh, (which

in our Ayurveda is called as *Grahani*). Before Tubercular ulceration comes in, there is generally a good period of warning during which pains are felt over the spot during food digestion, and as soon as the process of digestion is over, a relief comes. This period is generally very much favourable for treatment so that the future ulceration is avoided, but the physicians do not usually look to anything *behind* the pains, and engage themselves only to relieve the pains as *pains.* The Allopathic brothers mostly deaden the sensibility of the patient with the. help of Morphia Injections or by administering crude opium and opium preparations and make the cases more and more incurable. In any case, the deep *diathesis* is not touched and only the outer foaming is wanted to be removed, in their own way, but the deeper current merrily flows on and on, and ere long, creates the mischief apprehended. The pains and aches are only the good-meaning messengers to proclaim to the world that "there is something rotten in the state of Denmark." But upon the wrong assumption of the messengers themselves being the real foes, they are ruthlessly brushed aside and removed by any means whatever and the patient is made hundred times more diseased than formerly. After some time, ulceration comes in when X-ray photos are taken and the unfortunate patient is told—"Oh, the most undesirable ultimate has come, because here, you see, there is an ulceration, but let us see what we can do with our Injections very lately discovered after so much laborious researches."

The patient gets consolation for a time and what happens you know already.

(3) Another form of manifestation may show itself in the bone tissue by bringing in caries and ulceration there. In a few cases, curvature ensues or irritation and pains are felt within the spine. You will find bone tissue diseased and ulcerated by the Tubercular miasm, or involved in some other way.

(4) Symptoms and mal-functions are found also in some special organ in the human system, which are found so persistent, tenacious, protracted and generally unamenable to treatment, that the Tubercular diathesis is suspected in the organism of the patient, and Tubercular remedies of high potencies are needed for a cure. Albuminuria, Diabetes, etc, are the instances.

(5) By far the most important development of the Tubercular miasm is to be found in the brain when it is called a *dementia* or *an insanity.* Here also, the physicians are under the idea that it is a *local* disease of the brain, and use patent medicines for it. They are generally habituated to look only to the surface conditions and surface symptoms, without any the least desire to enquire into and find out the true cause underlying all these different manifestations.

Now, a question may be asked—"Why there should be so many different types of manifestations in so many different portions of the organism, though the real cause is the same, viz., the Tubercular diathesis?" The answer is that when the Tubercular

miasm is about to develop, it finds out and attacks the *weakest* spots in the system. These weakest spots must be different in different individuals by virtue of the working of the previous miasms present in the system before the on-coming of the Tubercular one.

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## PRINCIPLE OF DISEASE AND ITS CURE

All and every kind of sufferings of a human being must be, and actually is, the result of broken Law. Tuberculosis is the effect of the *moral* Law being broken under the wrong guidance of Psora, the primitive miasm and the deadliest foe of the human being. We shall come to the Law-breaking which leads to Tuberculosis later on, that is, after we have finished the general topic of Disease and its cure.

Any physician practising the Law of Similars must have to clearly understand the principle behind the disease and its cure. What is a disease? They will call Pneumonia a disease; they will call Typhoid fever a disease. They have got a long list diseases, but as a matter of fact, these are all so many *names* of the *results* of the *true disease.* The true disease is the disturbed condition of the Vital Force which is at the back of the growth, development and decay of the human body. When and so long as the Vital Force is in its natural and normal condition, all the functions of the various organs of the human organism are smoothly and harmoniously performed, and the result is a perfect harmony within, which is called "health."

In the dawn of creation and for some time after, there was a perfect order and harmony within the human system, because the people used to have been quite satisfied with their own lot, and used all the time to live a life of love. Love is the Law of Life,— and they all lived in accordance with this principle. In course of time, people began to entertain hatred and envy, and thus broke the natural Law and subjected themselves to Psora, which is only a product of wrong thinking and wrong intending against others. It is generally known to all how Psora first originated and I need not enter into its details. This much is sufficient, for our present purposes, if we bear in mind that Psora came into being as a result of our wrong thinking and wrong willing, and this Psora defiled the Vital Force and its current, and compelled the Vital Principle to act under its sway. The Psora is the prime cause of the disease. (want of ease) and the disease is only a disturbed condition of the vitality,—the condition in which it is unable to work in its wonted natural way but under the sway and pressure of Psora. So, "a disease," properly so called, is the wrong action or mal-action of the Vital Force, and the various named diseases are only so many *results.*

Our Vital Principle reigned supreme before Psora, that devitalising principle, came into being, and kept our system in wonderful order and harmony. The true mission of a human being is to seek his Creator, and if he can successfully perform the duties in his early life in the natural way, the desire

to seek God must of necessity and as a natural process, automatically merge within him, so that he may seek the ways and means as to how he can fulfill his mission. Under the influence of Psora and other miasms, the table of his life has been turned, and far from desiring or seeking those ways, he is found to be quite unable, throughout his life, to defend himself from the attacks of various maladies and distempers arising from his having led the miasmatic disorderly life. Nay, he gets quite oblivious of any mission in life, save and except his self-defence from the inroads of so many diseases. Not only so, partly under the miasmatic influence, and partly by virtue of the suppressive modes of treatment prevalent in the country, the disease conditions are going on multiplying and multiplying, so that he cannot think of a single moment of ease and comfort in life. To think of fulfilling the life mission is absolutely out of question.

Now, the Vital Principle having had to act under the influence of Psora, or, in course of time, of Psora and other miasm or miasms, it could not act in a natural way, but only in a disorderly way. The functions of each and every organ of the human organism could not now be performed in an orderly way, so that there could be a perfect harmony due to the natural and co-operated smooth work of the organs, but in a *mal*-way. The law is that so long we are healthy and our organs work and function in a healthy way, we are quite *unconscious* of any of the organs or parts of our organism, but shall

only be conscious of our self-existence only, so that we can only feel "I exist", and that is all. But now as soon as any of the organs commenced to mal-function, the human being commenced to feel the existence of that organ, and by and by, painfully, so that people would say, the man has got a liver disease, or a chest disease, and so on, according to the organ that may be so mal-functioning. Now, one must clearly understand the *reason* why some organ or a set of organs does not function in a normal or natural way. None of the organs of the human system is free to act in any way it wishes, but it is bound to act *under the promptings* of the Vital Principle or Vital Force, Each and every organ is controlled and prompted to work by the Vital Force, and is under the central Government of the Vital Principle. So, it is a senseless method of treatment to apply *local* medicines to the organ or organs mal-working, and to force them to work properly, because they cannot do so unless and until prompted by the ruling agency, the Vital Force. Proper way should be to remove the vital disorder, and the systemic work will go on quite smoothly and naturally.

Suppose, a particular organ thus mal-functions, the on-ward steps will follow in this way—(1) First, the individual begins to feel the *existence* of that organ, (2) by and by, he will feel pains and aches in that organ, in other words, he will *painfully* feel the existence of that organ, (3) the body of the organ will now suffer a change, in other words, an *organic*

change will now be effected, and (4) a hardening process or the formation of an *ultimate* will now come in, making the chance of cure more and more remote and at the last impossible.

It may be noticed here that the whole course of development of the disease is an onward process from *in to out.* It will be seen that in every case of disease, the cause, i. e. the vital disorder, *flows,* as it were, from the first feeling of existence of an organ or a part, to the formation of an incurable ultimate. In other words, it would clearly appear that the whole process of development was *within* the real cause, and it is only the extension or outflow of the cause, from first to last. Hence the cause is to be removed or else all attempts of cure are futile, nay, in most cases, injurious.

For the purpose of cure, the more the process advances, the more difficult would it become, and so, the sooner it is undertaken, the better for the cure. The most favourable time for the purpose is during the first and second stages above referred to. During the third period, cure is possible, though a bit more difficult, but in the fourth or last period of ultimation, the cure is more often impossible than otherwise. The reason for all these must be understood and shall be explained in the next para.

The cure of a particular human disease or distemper does not lie in the hands of the physician, however well-meaning he may be, but it is always in the hands of Nature herself. How? The cure always depends upon the existence of some *data.*

The thing is that whenever there is any the least disorder in the human system, the Vital Force must express it in "signs and symptoms,"—and these are the data upon which to select the curative remedy. In all curable cases, this totality of symptoms must be present, and the Physician has only to select the remedy which is known to have produced, in its proving, just a similar set of symptoms, and the law is that that remedy *must* cure. No theory, no opinion or nothing of the kind is of any avail, but the totality of symptoms must be present or no cure is possible, because without the data or the totality of symptoms, no selection of the curative remedy is possible.

*Names* of diseases are given upon a few *common* symptoms of each case and are not at all of any the least use for curing it. Those names may be very useful for other purposes, but absolutely useless for the purpose of cure. An illustration, I think, will clear up our position. Suppose, a man is down with a certain kind of illness. The Doctor comes and examines him, and says that as he has so many common symptoms of Pneumonia, viz., difficulty of breathing, constant coughing dry or a bit moist, high fever, etc, his disease must be called "Pneumonia." So much so, very good. But when he will try to select a remedy for his cure, those common symptoms are altogether useless, and the physician will have to seek for the *individual* symptoms of the particular case. Upon enquiry, suppose, he finds that the man has frequent sweats, but *still* the fever would not

decrease, that he cannot lie to any other side except to the left, that he has a thickly coated and moist tongue full of salivation, etc, etc,—in that case, he can select *Merc sol* for him, because the remedy has exactly the same group of symptoms manifested in its proving. Now, suppose another *individual* is down with the same disease of the same *name.* The *common* symptoms are exactly the same as in the former, but as these will not avail for a cure, the physician begins to enquire about the *individual* symptoms as in the other case, and suppose, he finds that the patient is unable to lie to any other side except to the right, that he has a high grade of thirst and for a big quantity of water each time, that he has ordinarily a dry skin, but in case of even a scanty perspiration, he obtains a good deal of relief, etc, etc, he will require *Phosphorus.* In this way, every case of Pneumonia may require altogether a different remedy for its cure, in accordance with the totality of *individual* symptoms in each, though each of the patients is down with Pneumonia,—the name having been given according to the same set of *common* symptoms present in each case.

The above will give you an idea of *the principle* underlying the prescription of any particular so-called disease. The disease, in every case, whatever may be the name given to the outer manifestations, I mean the symptoms expressed outside, is the *Vital disorder,* and the removal of that disorder by the prescription and administration of a remedy under the Law of Similars and based upon the totality of

symptoms, is the *cure.* Removal by any *other* method is only a *suppression* and not a *cure.*

Now, to cope with a particular disease of any name or denomination, two things are to be entertained by the physician. One of them is *Prevention* and the other is *Cure.* These two are to be dealt with under two separate heads. Every process depends upon some fixed Principle or Law. Either Prevention or Cure cannot be expected without acting in accordance with some fixed Principle and under the Law of Nature. None of them can depend upon anybody's *ipse dixit* or opinion. The Law is there behind all creation and the events happening therein, and nothing is an *accident,* though sometimes it *appears* to be so. Behind all appearances and events in Nature, Law is working and that same Law governs either Prevention or Cure of any named disease,—be it an acute Pneumonia or a severe type of Tuberculosis, the chronic of chronics. Human opinion may be and actually is, erroneous at every step, as we daily experience, but the Divine Law is above error.

We shall deal with those two important rubrics in the next chapters. We mean to up the heading of Cure, first of all, and then shall come to the other.

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## CURE OF TUBERCULOSIS

I have already given you a clear idea as to the stage in which Tuberculosis is amenable to treatment and cure. For a long period in the life of a man, it remains as a *diathesis* and this is the time when you can best think of curing the individual. Because during this time, you can fairly expect to have the totality of symptoms, which is the only thing necessary for the selection of the curative remedy and eventual cure.

The only prognosis of cure is the presence of symptom-totality in the *diseased individual.* A few words are necessary for an explanation. A patient generally has three classes of symptoms. The first class is his *mental picture, as changed by the* disease process. The second class consists of symptoms relating to his *whole body as of an individual.* The third class relates to those expressed in the *disease manifesting spot.* I am going to give you an illustration. by citing an actual case of a Tubercular patient, though rather a bit advanced, so far as the disease-process was concerned.

Sj. Abani Nath, M.A., an inhabitant of Midnapore, having had suffered from Malaria, and having taken an abnormal quantity of quinine, found himself losing his weight almost every month, and felt that "his life-current was at its lowest ebb,

and so required the real treatment." He took services in the Education Department, as a senior Teacher of a High English School and as he had a special proficiency in English, the subject which was fixed for his giving lectures on and teaching, was English. After a period of less than two years, he felt himself incapacitated for the work, for he commenced to feel an extreme weakness during · the delivery of his lectures. He felt as if his chest and heart region were altogether vacant, as if nothing was there, and so thought he must have a rest and took leave of his services. He placed himself under my treatment in August, 1923.

I took down his case on the 19th August, and I wish you to note the symptoms of the case, which I shall specially for you, classify after I finish the records.

Before coming to the records. I learnt from the patient that during the time from 1919 to the time he came up to me, he had used various "tonics and invigorating specifics" as prescribed by the Allopathic Physicians, but "none of them could tone him up." The main peculiarity of his case having been *wasting and emaciation,* an idea naturally came up into his mind as well as into the minds of the good-meaning physicians that treated him, that a nourishing diet and exercise were the only things needful for him, assisted by a few specific tonic medicines. That was the line of treatment followed by him during the period and when all attempts in that line had proved fruitless, he left Allopathic

treatment altogether and came to me for treatment. Now, to the records—which I am going to give you as much in his own words as possible.

*"Intense weakness*[2]. Doctor, yet I *cannot rest still*[1] for a moment, and if I do, on will come *the anxiety of mind*[1] and a *sense of flushing*[2] upwards. So that I must have to move along and walk about—The greatest weakness I feel in my *chest*[3] region as well as in *the stomach*[3], and I have carefully observed that if I drink *a glassful of ice-cold water,* instantly I feel relieved of my weakness and goneness within, but the water to be drunk, must be *ice-cold*[2]. I think I have a good appetite and can eat tolerably well, but, kindly see, Doctor, I am losing and losing all the time. I *do not like to talk*[2], and I am quite upset if I find somebody coming to me to hold a conversation upon some point, and I try to avoid him; this is simply because I feel so tired from talking. Suppose, I am compelled to talk on for some time, I must have to be coughing and coughing for a few minutes together. It is simply a dry cough, and no mucus is raised. All other functions are normal, and nothing to complain of them. Only one; word more,—I think I have a *sexual desire more than normal*[2], and though there was hardly any excess, yet I find *my semen is rather thin*[2], and is discharged too soon during coition."

On cross-examination, I got the following—"I have a *special liking*[2] for salty foods, juicy, refreshing and fresh things; *water. or drink 1 want ice-cold*[2]. I

am *more loose than constipated*[2]. I have *thirst more than normal*[2]. I *perspire more* and I must have to move along all the while. I *lie to the right*[1], and can never lie to the left,—I am quite sure of it. I *feel an inward dryness.* I *must have company*[1] and cannot remain alone. I have a *fear*[1] of ghosts and bad neighbors. I fear electric storms also and generally avoid sounds of all kinds. I think when I was too young to remember, I had various *skin-diseases which were all suppressed** with the help of external ointments."

In the above record, you will find all the three classes of symptoms above referred to. The Tubercular course was found to have been rather a bit advanced in the case, as evident from "emaciation." I have put in the numbers, 1, 2, 3, in order to classify the symptoms under the different headings given above. The point marked* is not a *symptom,* but it rather belongs to the history of the case.

Now, to expect a cure, all the three classes of symptoms are necessary, on the basis of which a remedy is to be selected which must cure. Even if the first two classes are found and not the third class, cure is certainly possible; but where only the third class is present and none other, the cure is very much doubtful. The principle of cure, I have already clearly stated and it need not be repeated.

Now, the only thing which can give you a *prognosis of cure* is the presence of the totality of symptoms. Cases some which contain only the third class symptoms that are present and none other, and you

cannot do anything in the way of cure. Regarding the prognosis which the family of the patient most eagerly wants, you are to be much careful, as any hasty and careless opinion coming from you may prove, in the long run, injurious, not only to your personal reputation, but also to your profession and to your dear system of Homœopathy. You know, constant failures under the Old School treatment are taken by the people as unavoidable, but they are reluctant to tolerate even a single failure at your hands. So that you must be very careful about expressing your opinion regarding prognosis. I give you once more a few lines that will help you in the way.

The presence of the totality of symptoms consisting of the above three types is the *sine qua non* or the absolutely necessary condition of cure. This must be present or no cure is possible at all. Then *the stage* in which you get the patient is of utmost importance in declaring your prognosis of the case. So long there is no active manifestation, I mean, the localisation with ultimation, there is, of course, every hope, provided the totality of symptoms is there. Now *just after* or *immediately after* the localisation. and ultimation take place, the case is rather *doubtful* and no clear opinion of prognosis can be given, unless a full-fledged totality is found in the case. But if it is long after the ultimation, the case stands very much doubtful, as you will notice that in proportion the case proceeds in that stage, by and by, the symptoms will be vague and quite *common*,

without any the least shade of *individuality* in them. Always remember that you can never cure a *disease,* but *a patient* with a full *individual* picture in shape of symptoms and peculiarities relating to him, and not to his *disease.* A case with only *common* symptoms of the locality invaded and diseased, is mostly *incurable.*

Now, you, as a physician, must have to clearly observe the different stages of development of the disease process and find out the stages favourable for a cure, You should know that nothing remains *stagnant* and *unproductive* in this universe. The seed once obtained without the system cannot remain in the same form for all times to come,—that is not the Law. The Law is that the seed must germinate and grow and must, in time, become a tree; so that it is on the look-out of the favourable circumstances, which are technically called "Exciting causes," so that the germ may be able to proceed in its onward development. The Law is that a seed *must* get the. help of helpful circumstances, for the purpose. Wherever there is a strong desire or will, there is the supply. The cause or the true cause has *a potentiality* within itself to find and meet the exciting cause, so that, it may be said that the exciting cause lies in the womb of the true cause. This is quite in keeping with the Law of Nature.

When the seed of Tuberculosis is inherited from the father or an ancestor in the form of hereditary Syphilis and which, in future, may develop into active Tuberculosis, it *must* proceed in the way of

development, because thenceforward it is the look-out of Nature, as it were, to see that the seed should bear fruit in time. Just think that the seed or the true cause is there. Nature's help in the supply of exciting cause is also there, hence the final development, or fructification is only *a question of time.* The seed shall always be *in the process of* development, and active Tuberculosis is the final ultimation.

The general rule is that a cure should be attempted with all means during the *dormant* stage, and the *onward process* being there, the earlier the steps for a cure are taken, the better for the patient. I think I should give you an illustration to explain the position. A child of a Syphilitic father must be born with some special peculiarities which are not found in other children. The Syphilitic child is found to be constantly restless during night-sleep and must have to be fanned every now and then, otherwise it will not sleep, nor would it allow its mother to sleep. The child gets a profuse· salivation during its sleep, as also during the day. The sweat is also very much profuse, day and night, and the sweat has a nasty smell. These things and a few more, taken together in a totality should. be removed with the help of a high potency of some remedy belonging to the Syphilitic group. But suppose, no steps are taken at such a time, and the child is allowed to grow as other children are. What would you expect? Would you expect a healthy growth? No, it will be stunted, dwar-

fish and thwarted. The teeth will be badly rowed, ill-set, cup-shaped, decaying at the edge of the gum and breaking off; the mind must be very much despondent, cross, irritable and peevish, ophthalmia neonatorum—a frequent event; ulceration in the mouth, even destruction of hard and soft palates. These will be the earlier symptoms. During boyhood, some of these symptoms may recur every now and then. If no attention is still paid and no treatment is followed, the course of heredity will flow on, and a further set of symptoms will develop, viz., dullness of the mind, so that nothing is remembered, nothing is learnt, the boy grows up into a "do-nothing" fellow, a general susceptibility to cold and coryza will be found, bodily development will also be stunted continually; enlargement of the lymphatic glands everywhere in the system. Asthmatic tendency during warm and damp weather, pigeon-breastedness, so that expansion of the chest becoming more and more difficult, general emaciation with loss of appetite and salivation during sleep, restless sleep, too much perspiration during sleep at night, development of cracks and fissures at many places where skin and mucous membranes join, offensive discharges, offensive leucorrhœa of the females and acridity of the flow, soreness in the female organs, ovarian pains and painful and excoriating menses, etc etc, will come in. In extreme cases caries of the bones,—of the spine, may also appear. Disturbance of sleep and a terror for the night are also to be expected.

Now, in case these symptoms are not noticed, as is the case with the generalities of people, a Tubercular course is certain to be developed during the youth, when the vitality is most active. So it will be quite clear to you that, the earlier you take steps to cure the individual, the better for you and your patient. I say, "better for you"—Why? It will be quite easier for you to collect the symptom-totality which is the only basis of your treatment, if you start the treatment rather early.

If the treatment is taken up during the earlier years of the child, you will have a full totality at hand, and you will have quite an ample time to observe, study and prescribe. The treatment should at least be commenced some time before the active manifestations are threatened. If it is taken after the active manifestations commence, it is highly doubtful whether your attempts will be crowned with success. Of course, each case is different, because, the nature, the course, and the symptoms are quite different in each individual case, and nothing can be said in the abstract. I shall give you a few cases and their treatment, taken up during the different stages, so that you may have a fair idea as to how to proceed in the treatment.

During the treatment, the most inconvenient predicaments you will be put to, are the two,—viz., (1) the *suppressive treatment* followed by the family from time to time, under an erroneous impression that it is conducive to the patient's good, even in spite of your clear instructions to the contrary; and (2) the

*aggravation* that may follow the administration of your high potencies. These things you are to manage by yourselves, and no general instructions can be given regarding the difficulties. Cases will, I am sorry to say, appear in which you will have to repent, as all your advices and admonitions will be thrown off, and the patient's treatment will be placed under Allopathic hands, and the patient's future welfare will be veritably blasted once for all. The method of giving Injections is most detrimental and highly injurious, but who is the man that will pay any heed to your words? The stereotyped method will be resorted to all the while, irrespective of the serious results occurring under the very nose of the lay public and the profession, but still nothing can give them a pause to think and revise the method!

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## CURE AND PREVENTION

As I have carefully analysed all the stages and conditions of *a cure* of Tuberculosis in the previous Chapters, I need not now dwell further on it. The prevention of Tuberculosis is much more an important thing and I think I should now deal with it.

Prevention of Tuberculosis consists of two things,—viz.: (1) preventing the causes and circumstances producing the Miasm or Diathesis, and (2) when the diathesis is already on, preventing the active manifestations coming in. I think I should clearly explain my position in each of the above two items.

(1) *Prevention of the Diathesis to come on.* It is a vast subject, and you should deeply study and think over the matter. "The preventive measures ought to be commenced in the ancestors," so they say, and it is verily true. You know, Tuberculosis in the son is Syphilis in the father. Of course, acquired Syphilis mixed with Psora may bring in and actually brings in many cases, the Tubercular diathesis. But in any case, the reason lies in the undue satisfaction of unbridled passion, either of the father which flows as something dynamic to the son, or of the individual himself. The reason is lawless satisfaction of sexual desires, and nothing else. The miasm of Syphilis only aggravates the condition by leading to the miasm of wasting

Tubercular diathesis, a tendency to ulceration and decomposition. But in cases where the Syphilitic taint is truly cured at the very inception and so is not allowed the opportunity of co-mixing with the in-dwelling Psora, still the dry form of Tuberculosis, technically called "Consumption" can never be prevented. The prime cause is the disorderly indulgence in the sexual enjoyment. Just understand the sexual philosophy in its true aspect. The Sycosis or the Syphilis, as miasms, are only aggravating factors or agents, but *the primary* cause or circumstances in bringing about the diathesis is the unnatural and unwholesome indulgence in sex-satisfaction.

We have, in our system, six nerve-plexuses within the spinal column, *(Muladhar, Swadhistan, Manipur, Anahata, Bishudhha,* and *Agna*) the lowest end of which contains the *Muladhar,* the basic plexus, where *Kula-Kundalini* is resting in the sleeping condition. This *Kula-Kundalini* is the sum-total of energy. I cannot refrain from quoting the memorable and the most admirable estimate, in a few words, by the great Swami Vivekananda on this point.

"The nervous centre at the base of the spine near the sacrum is most important. It is the seat of the generative substance of the sexual energies and is symbolised by the *Yogi* as a triangle containing a tiny serpent coiled up in it. This sleeping serpent is called *Kundalini* and to raise this *Kundalini* is the whole object of *Raj Yoga.*

"The great sexual forces raised from the animal

action and sent upwards to the great dynamo of the human system, the brain, and there stored up, become *Ojas* or spiritual force. All good thought, all prayer resolves a part of that animal energy into *Ojas* and helps to give us spiritual power. The *Ojas* is the real man and in human beings alone is it possible for this storage of *Ojas* to be accomplished. One in whom the whole animal sex-force has been transferred into *Ojas* is a God. He speaks with power and His words regenerate the world *** no man or woman can be really spiritual until the sexual energy, the highest power possessed by man, has been converted into *Ojas.*

"No force can be *created,* it can only be *directed.* Therefore, we must learn the control of the grand powers that are already in our hands and by will power make them spiritual instead of merely animal. Thus it is clearly seen that *chastity* is the corner stone of all morality and of all religion. Absolute chastity in thought, word and deed is a *sine qua non.* The same law applies to married or single. If one wastes the most potent portions of his being, he can not become spiritual."

From the quotation, you will be able to understand that the aim of your life is to direct the energy, stored up in the *Muladhar* lotus in the form of sleeping *Kula-kundalini* spirituallv, so that you can fulfill the aim of your life. Be that as it may, I do not mean, nor do I advise anybody and everybody to practise *Raj-yoga*; but the point is that if you want *to live as a man* you must have to *control* the sex-energy

and never to *waste* it by living a life of indulgence, I mean, in the way of satisfying the unbridled desire for sex-satisfaction.

The next thing to pay heed to, is that this plexus is the *turning point* of a man. If he wants to yield to his animal passions, he may go on and on, and at last step down into the realm of animals; but in case he wants to go the other way and to direct his energy spiritually, he shall have to control his passions, so that he will gain in spiritual strength by and by, and shall be successful in gaining his object and the mission of his life. Even if he *does not* want to take the spiritual path, but *only* to gain in mental and physical strength, still he must have to take the help of self-control and self-discipline, because the source of any type of strength is the storing up of sex-energy and there is no other way.

The *Kundalini* contains within it the *Sanskaras* good or bad, stored up within it. These *Sanskaras* are the resulting habits acquired in the past lives and they give you directions and promptings in this life. In case you were born with the sexual habit preponderant in you, you will be led to sex or sense enjoyment in this life very early and hence the necessity of self-control in your early life., That is the reason why in former times, in our country, the students had to live in *Guru-griha* in constant company with Guru or the Spiritual Director, for the *Arya-Rishis* knew perfectly well that the spiritual training and self-discipline were the only way for their future welfare in forms of being good and ideal

house-holders, as well as, to take up the path of spiritual culture for the purpose of obtaining the true aim of life duly fulfilled. Nowadays every thing has been made *topsy-turvy,* as the result of our blind imitation of Western culture full of externalism and godlessness.

Now just look to the thing,*—habit.* The habit can make you a demon or a God, according. As it is of evil nature or of good and holy nature. Just think of its great potentialities and tremendous influence that it can exert upon you. A good habit once made will raise you up. and a bad one will lead you down, without any the *least effort* on your part. You need not exert yourself, nor even pay any attention to what you should or should not do, but the very habit will unconsciously or rather automatically lead you. A good habit once made stands as the best friend in your life. so a bad habit may lead you to destruction. Now the point is that no *effort* is needed, you will be *automatically* led on and on. So you will see that the habit of sex-indulgence once made will lead you to waste and waste the semen substance,—not only by *actual* commission of the act of coition, but *automatically,* even by *involuntary* emission of semen, during dreams, when straining at stool, even when walking. A sudden sound even will bring out the semen through the passage. This *involuntary* wastage you are wholly unable to check, unless you are aided by constitutional treatment.

The habits earned in your previous lives are stored up, as I have already said, in the form of so many

*Sanskaras,* in the *Kundalini,* and you start your present life with those. You see therefore that some people have a peculiar aptitude and efficiency in doing a particular thing, in which he has already formed a habit, and many things are quite repugnant to him, which means that he did never make a habit, in his previous lives, of doing those things. You find prodigies in the society and the reason is there.

The main substance of all this is that you must have to live a life of discipline and control, and put a stop to the unnatural wastage of semen. If you have already made a habit of wasting, just form a counter habit, to be saved.

The true prevention of Tuberculosis lies in storing up of semen by adopting *Brahmacharya* or self-control. All other efforts for the purpose must be abortive. This is the only thing which the present day society must take up in right earnest, so that the susceptibility to Tuberculosis and active Tuberculosis will *be no* more, and the glow of health, longevity and supreme beauty will really be staggering. Swamiji, I mean, Swami Vivekananda, said—"Let us all be men," and what he said is verily true. *Brahmacharya* or self-control should receive our first attention, if we want to save the present day society from degeneration and destruction. Without self-control, all other attempts are of no use whatever.

I cannot help without quoting the memorable words of our beloved Swami Trigunatita, the holy monk of high spiritual culture and one of the holy disciples of Lord Shri Ramakrishna,—"What is the

reason? A man who was almost free from diseases, who used to do whatever he willed? Now, why is he to-day beset with thousand fears, worried by destructing thoughts and is sinking in the abysmal ocean of discontent? What is the reason? *It is all due to lack of continence.* Time was when a child would by his reply, pregnant with wisdom; strike dumb his enquirer, though an intellectual giant; when children like Nachiketas and . sages like Sukadeb were born. Why has such a society been brought to such a pause? It is because we have lost that ancient fire, that ancient force in us, due to lack of continence. Without continence nothing can be achieved.

"What is *Brahmacharya* or continence? It is a conservation of the sexual energy. In all spheres of life whether spiritual or material, whether pertaining to this world or other, this conservation of the sexual energy is absolutely necessary if success is to be attained. Without continence you cannot have perfect health or be able to do good t others or attain: realisation. Therefore, there is no hope of success in *any* sphere of life, whether material or spiritual, unless man maintains absolute continence. Shri Ramakrishna used to say,—"when a man succeeds in the conservation of his sexual energy, his intellect reflects the image of Brahman, even as a glass gives a perfect image when its back is painted with mercury solution. The man who carries this Brahman in his heart is able to accomplish everything; he will succeed wonderfully in whatever

action he engages himself. So without continence our life is useless."

From all this, you must be convinced that prevention of this dire disease is to be obtained only from *Brahmacharya* or self-control practised in the prime of life. All other advices and efforts are futile. There is another thing which is a great asset in life. The man purified with the fire of self-discipline feels a heavenly peace and enjoys the highest bliss within, and so it is a great treasure. Whereas, without this real treasure, a moneyed man is truly a beggar, passing his days in fear and various anxious thoughts and has no mental peace and rest. He does not know what is contentment or bliss. Whether for the material and worldly prosperity or for true, peace and heavenly bliss, *the one thing needed is self-control.*

This measure, I mean, self-control, is of course, the best one for the purpose of prevention of Tuberculosis. But I quite feel that the success can only be attained after a long time, at least one generation afterwards. Unless the father is perfectly continent, he cannot beget a son of pure mind and tendencies. Don't you see that lots of boys in the School practise the ugly habit of masturbation? There are other boys who do not do so. Those that do and commence the destructive thing, have been *born with the seed* of debasing tendency in them. Otherwise, why do they indulge in losing the precious fluid so early, even before the normal sex-urgency originates? That is the key. If somebody wants to have a pure son, he himself must lead a pure and continent life. A son

is one's own reflection. Now, if father in society observe the moral code in their lives, it is only natural that they will be blessed with good and pious-minded sons.

(2) I feel within myself that you need ready methods and off-hand means of prevention of Tuberculosis in patients that have already shown symptoms of Tubercular diathesis or are threatened with a Tubercular break-down. Now, I am, going to deal with the second branch, i.e. the ready methods.

The means of prevention, I mean, Self-control, previously referred to is also highly effective for the purpose of aborting the on-coming of Tuberculosis in the life of every individual. I know a few such, even coming from the Phthisical fathers, to have escaped the attack, simply with the help of their leading orderly lives. I am sure, continence; is the sovereign remedy for the purpose. But these cases are certainly highly exceptional; and so ready and effective suggestions must have to be taken help of, in each case with that diathesis or already threatened with the break-down. In any case, the continence is a *sine qua non*,—and this ought to be remembered by you.

You know Tuberculosis is a highly destructive condition, and every individual with that diathesis *must have* a few destructive tendencies in them, which you are to thoroughly enquire into and cure at the very outset.

(1) The *first and foremost* of the immediate

methods of prevention is to deal with every case of ailment, even the slightest,—Homœopathically and never to allow any *external* and *suppressive* treatment for it. This advice is to be carefully borne in mind.

(2) The patient should be always moderate in living, in taking his food-stuffs, in taking his exercises, and specially in sexual matters. Any involuntary loss of semen should be notified to the physician at once. I have already convinced you of the importance of maintaining and storing up the semen substance within the human system, specially in a Tubercular system.

(3) Any case of suspected wasting, viz., bleeding from the nose, night pollution, etc, must have to be enquired into, and prescribed constitutionally and treated in such a way as to stop the process as shortly as possible.

(4) Intense *dryness,* i. e. cessation of perspiration, or *abnormally profuse* sweating, must have to be taken with suspicion, as the Tubercular process has many times, been seen to follow after these.

(5) Intestinal disorders, specially, loose stools, off and on, are fore-runners of Tuberculosis.

(6) Nasal catarrhs, coming on, how and why, not known or detected, are highly suspicious.

(7) History of the attack of any disease or diseases of the respiratory organs and Allopathic treatment adopted, must have to be thoroughly enquired into. It is often seen, that the first stone of Tuberculosis is laid thereby.

(8) Cases of inability to take a full breath and consequent want of full expansion of the lungs must have to be carefully guarded against.

(9) In cases where there are patches of ringworms over the body, it must have to be carefully seen that no suppressive or external means are applied.

(10) Adult males affected with acute Syphilis or Gonorrhœa, must not think of marriage, unless and until those maladies are fully and miasmatically cured *under* the *Law of Similars.*

(11) Insanity and Tuberculosis are convertible conditions, and sons and daughters of insane or Tubercular parents are not marriageable, because there is every chance of their being attacked with Tuberculosis.

(12) Any morbid fear of being attacked with Tuberculosis should be taken as a forerunner of Tuberculosis, the fear being the warning given beforehand by the innermost self.

(13) Any tendency of the system towards wastage, as already said, must have to be corrected and cured. For example, an individual has an abnormal sweat, or an abnormal quantity of urine, or the tendency to profuse bleeding, either through the nose and any other outlet of body, or during the menses, a propensity to masturbation, even with a relief thereby, etc etc, are to be taken as precursory symptoms, and warnings to the effect that Tuberculosis of either dry or ulcerative form is just ahead, and must have to be cured by constitutional treatment.

(14) The peculiar characteristic of being abnormally exhausted and weakened, *quite disproportionate* to the amount of discharge, must be *taken* as a sign of Tubercular diathesis.

Though I have already given you several times an idea as to how much you should expect to do in the way of doing good to the Society by treatment of this dire death-dealing malady, yet I think I should repeat. Those physicians that vociferously run away vaunting that they are capable of curing patients during active Tuberculosis, are to be believed with a grain of salt. Either they do not know what an active Tuberculosis is, or they must be willful withholders of truth. During the active stage, it is better never to hold out any hope to the patients' attendants or friends because the chance of cure in such a stage is very very remote. The only cure that can be expected of Tuberculosis is during the stage of diathesis, which is technically called the "primary" stage. Whatever may be the name of the stage, so long as *the spot for actual manifestation has not been selected,* in other words, so long there is diathesis only, the patient may be cured, but as soon as the tissue change commences, no promise of cure can be given. This ought to be remembered.

Advertisements are daily met within the columns of newspapers and periodicals proclaiming "Eighty per cent cure of Consumption and Tuberculosis," provided only the specific advertised is regularly used for so many months or so much time, etc, These advertisements must not be relied on, though they

speak of the specific being a "Homœopathic specific." You are fully aware of the Fact that in Homœopathy there can never be a specific for a disease, but in every case, it is *individual.* Nothing more need be said in this connection. If somebody amongst ourselves, only for Personal gain or personal name, gives out that he can cure such a percentage of Tubercular cases, there is no use in arguing with him, but simply pity him and that is all. For yourselves, be guided by true men who are the sincere followers of the Master.

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## SPREAD OF TUBERCULOSIS

It is of course admitted by every one in our profession that during the recent time, Tuberculosis is and has been spreading like wild fire. Wild fire it verily is, because if one case crops up in a family, it is found that almost all the members of the family by and by "catch fire," and most of them or sometimes all the them succumb. This *is* the experience of almost all of us *in* the profession. I for myself remember that when a single case of Tuberculosis came up to me for treatment, several physicians of the locality used to came over to my Dispensary in order to see and learn how the case was handled and treated by me. Because Tuberculosis was a rare thing at the time. This was the condition up to the first decade, or the first quarter, of this century, but ever since 1920 to 1925 the table has been turned, so that it may be said that there is not a single family, specially in big towns and cities, in which at least one or two members are not the victims of the dire disease.

What is there *behind* this awful spread of Tuberculosis? What may be the cause and circumstance standing at the back of and helping the onward spread? We have been learning from our early boyhood that ill-ventilated house, insufficiency of food-stuffs, vitiated air, etc, etc, are responsible for this spread, and then a certain class of bacteria,

technically called T. B. Bacilli, is the real cause of Tuberculosis. But, you all know that the actual facts that are found to happen in our country, absolutely belie the theory. Just go to the interior of every village and see with your own eyes, the condition of the poor class of people and what do they eat and how do they live. According to the above theory, every village should have been the seat of the formidable disease and a scene of horror and destruction. But it is found that there is hardly ever a case there. I have seen a single room of 8 by 12 cubits in dimension, to have been occupied by 11 members of a family, but none of the members did ever complain of any disease whatever—not to speak of Tuberculosis. Regarding the microbes or bacteria, I have already told you as to their influence and agency in bringing about the disease.

The real fact stands altogether different. The real cause and circumstance helping the spread of Tuberculosis will not be found elsewhere, but *within our own selves.* The thing is that we have been making ourselves *more and more susceptible* to the disease, by the continued violation of the Law of Nature. You know, every disease is a sin-process, and Tuberculosis is triply so; The sin-process commences from the Law-breaking. The moral law is included within the Law of Nature, and it is principally the breaking of the moral law that is responsible for the on-coming of the destructive disease-process, named Tuberculosis. The moral law is as much the Law of Nature, as the law of gravitation is.

and so, by continually evading and breaking the moral law, we have been making ourselves. more and more susceptible to the wasting diseases. Unless the *soil* is kept fit from beforehand, the seeds cannot germinate at all. The soil must have to be made fit and ready; and we have been spoiling our systems by actually making ducks and drakes with the most valuable of our life-substance, I mean, the semen. You will wonder to know that the masturbating habit originates now-a-days in the boys as early as the 10th or 11th year of their lives! What should you expect under this circumstance? The substance is spent up before it is stored up in the system!

The Rishis of olden times could foresee the rebellious nature of our sexual propensity, as also the harm from the early expenditure of our semen substance, and so they for the general good of humanity propounded rules and regulations, I mean the disciplinary rules, to be observed in our early boyhood, so that the propensity may be kept in check and the desire may be satisfied within proper and healthy limits. But the table is turned and the veriest boy of 9 or 10 is found to entertain an idea that he is fully justified to act according to his own inclinations. What a pity! The meaning of life has been altered, the aim of life falsified, and hence the anomaly and confusion. Discipline is now-a-days explained to be *an outcome of slave-mentality* and the unbridled indulgence in one's lower propensities and desires, *as an indication of perfect freedom.* And freedom it verily is, running hither and thither according to the

dictates of vile desires is called freedom, and not the blackest type of slavishness to the senses, which it really is!

The moral law is strenuously to be observed in all possible ways. There are several types of coition. Even a gaze with lustful eyes at a female is a type of coition. Dwelling on sexual thoughts is a sort of coition. Scrupulous Brahmacharya or abstinence from sex-indulgence is required. What do you see? The semen which is the highest and noblest of tissues, which is tantamount to liquid life, as it were, is wasted from the early years, and what result do you expect? After willful indulgence for a few years, the semen is prone to escape involuntarily while urinating, when evacuating, even when sneezing and coughing. Along with this wastage of the most valuable substance, all the good qualities, viz., courage, veracity, working capacity, nay the very manliness is vanished, and the individual stands merely a dry skeleton of skin and bone, manlike in figure, but an automation, a mere cipher.

Formerly in our guru-griha, those pupils who were well-disciplined, used to be permitted married life and the rest were destined for celibacy and life-long Brahmacharya. But now-a-days those that are the most undisciplined and sexually run-down are hurriedly married, and the result is that married, sickly rickety children, like so may animalcules, are produced, who are either still-born, and take early farewell from the arena of the earth, at the very infancy, or during the youth on account of multitude

of disease, the cause of which lies in the redoubtable father who had earned Gonorrhœa and/or syphilis and got them suppressed by force, before their birth.

The present day society is full of such members,—I mean, the products of debauchery, and full of ugly disease, the products of incestuous copulation, etc, and these members and their progeny must, of necessity, be with a dreadful susceptibility to destructive diseases like consumption, Tuberculosis, etc, and it is no wonder. The father has sown, and the progeny must reap, and no amount of Injection or Hospital-erection, or of calling up meetings and conventions, and of passing legions of pious Resolutions can help you in the least. The real plague-spot is within your self and myself and all those outside attempts are only vain and futile.

The cause and circumstance for the spread is thus *the extensive susceptibility* of the present day people. The *soil* must be prepared, and so it is. The exciting causes are of course· there at present as they were formerly, but due to the preparedness of the soil, individual cases are cropping up in such a dreadful number. The soil is to be *reclaimed* by Brahmacharya or self-discipline, otherwise the society will be, as it is running headlong into ruin and destruction, and nothing can help.

The next cause stands and will stand, however much we may preach against it. Of course, the main point is the preparation of soil by giving under indulgence to sexual propensities. But the suppressive methods of treatment in vogue, all over the country,

are no less responsible for the on-coming and spread of the dreadful malady in the society. You know what "a limiting-condition" is. When you are brought to a position or a condition beyond which you cannot proceed, that position or condition is called "limiting." Just understand what is given below and you will realise why so many people are going down and down under the so many disease processes and disease ultimates of so many names and denominations.

All miasms are so many disease-producing agents, but they are the most harmless, nay, they are rather so many friends of human beings, so long as they are kept in manifested forms over the external body. You may ask,—"How are they so many friends?" Just see. So long as they are kept in their original manifested forms, they remind, always and very often, that the individual has committed sins in his life, so as to deserve the clumsy and detestable manifestations in the outer body. You know, the itching skin diseases of Psora, the nasty discharge of Gonorrhœa and the typical ulcerations on the genitals of Syphilis are the original forms. So long as they are on, they are really friends, because they exhort their victims never to break the law so as to subject themselves to such filthy eruptions, ulcerations or discharges. But as soon as they are suppressed, they turn so many foes and disease-producing agents. They must lead the human being to destruction on and on.

Just when they are on the external portions of the body, no harm, but if you apply the suppressive

methods of cure, they will commence to affect the internals—*that is the law.* By and by, they will enter deeper and deeper, unless and until, each of them reaches the limiting condition. Psora, when driven inner and inner, and at last to the innermost of the human system, can bring in the. permanent degeneration of the brain and nervous system—which is the limiting line of Psora. Sycosis affects the heart at the last resort, and therefore, you know, death occurs to the Sycotic patients, of "heart failure." Regarding Syphilis, the limiting condition is reached when incurable and wasting ulcers are formed upon the most valuable tissues. Thus, the suppressive modes rather *compel* the miasms to reach and affect the innermost regions of the human body and destroy it.

Tuberculosis is thus the limiting condition of Syphilis which is really a combination of Psora and Syphilis. When they combine and are transmitted to the son, after being thoroughly co-mingled through heredity, the combination is highly destructive in its effects upon the human system.

Thus, the *true cause* of the *origin,* as well as, the *spread* of this dire death-dealing disease, viz., Tuberculosis is (1) Want of Brahmacharya or undue satisfaction of sex propensities and waste of semen substance during young age; and (2) the suppressive modes of treatment.

I told you already that the violation of the law of Nature stands as the cause of our misery, and it is verily so. Because you see, the undue sex-satisfaction is as much a violation of the law, as the suppressive

mode of treatment is. There is a law of cure and if that is violated, not only so, the natural law of influx is arrested and falsified, what would you expect? Various diseases of altogether different names and denominations and symptoms must invade the system, and Tuberculosis is only one of them. Just follow Nature and Her law, and you are safe in every way. You are the children of Nature, and instead of following Her law of cure, you want to create your *own* law by way of "research" and "experiment"—what an audacity!

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## SEGREGATION AND CHANGE OF CLIMATE

The Tubercular patient during the active stage· of the disease must, as far as possible, be kept altogether separate and segregated; but it is more for the good of others than for the person affected. There are people who are going through the *diathesis* stage, and many go on and continue to be in that stage throughout the life, unless and until he happens to come in touch with an individual in *active* stage, when he might also be affected. This has been seen in many cases that came and are still coming to us for treatment, and the history of those cases confirms the above statement. Coming in touch with the affected person, of course, acts as an *exciting* cause, and has no other value. I myself have been treating the most serious cases of Tubercular patients in their active stages and did never take any the least precaution, but I was not affected,—the reason being, that the exciting cause cannot affect an individual unless the true cause or the susceptibility dwells in him. But a great majority of people is there in our society having the susceptibility lurking within, and so it is better that the individuals in the active stage may not, by virtue of contact, affect those people. You are to remember its real value, and never dream for a moment that a segregation has any the least benefit on the patient segregated. So, segregation has only a *negative* value.

There is a general cry amongst the practitioners, specially of the Allopathic branch, to the effect that "a change of climate" is a panacea of all ills that the flesh is heir to and can cure what their therapy cannot. It cannot be said that the idea is "scientifically" correct. If you have just clearly got the true insight into the principle of disease and its cure, you must discard the idea. The *true cause* of the disease symptoms to be manifested is the *susceptibility* lying within the human system, and wherever the patient may go, he will carry the susceptibility along with him; and the exciting cause is also found everywhere throughout the whole universe. But you may say—"we have seen some patients amply improved upon a change of climate" and in reply, I also say, "yes, I have also seen," but that is simply a make-believe and nothing permanent and lasting is gained. For only a few months, the patient may improve in a way, by virtue of different surroundings, new associates, etc but after some time, he will find himself exactly where he was before the change. If you fairly observe, you will see, this is the state of things, and you will find it in almost every patient that is sent for a change. The two permanent entities are there, viz., the true cause and the exciting one, and you cannot expect that a different locality or some changed surroundings can effect any change in the dynamic sphere of the patient. If you are a Homœopath of the true and Hahnemannian brand, you must not entertain these false ideas in your mind. Your prescriptions have a true basis, I mean, the

totality of symptoms, your cure is not haphazard but stands upon something fixed, I mean, the Law of Similarity; your Law of cure is not man-made, but it is a Law of Nature, all of which data are fixed and abiding. Then again, these things are not only fixed and true, but your prognosis is also not a matter of individual opinion, but a rigid fact, which is the absence of Totality of Symptoms. Just see that you cannot set all these fixed, true and rigid data at naught and depend on something that is changeable and of varied nature. To entertain a hope of cure by virtue of change of climate is to build on quicksand. They may build a castle in the air, because they have no law of cure, and their method of treatment does not stand on anything fixed and abiding, but depending as they do, upon personal opinion. Not only so, they do not cure the disease but only try to remove the result any way that is possible. They may rely on chance hits or try to catch up anything and everything to encourage their patients, but you cannot. Moreover, you know that nothing *crude* can do anything in the way of giving any abiding relief to your patient,—a Tubercular patient is always a deep one, and only *dynamic* can bring any change in the *dynamic* plane. But I must admit that cases are there where "a change of climate" is the *only relief* for the patients, as they are in a stage which is beyond cure. Only short respites should have to be given them, or else the life of the poor sufferers is an intolerable burden. Where the patients reach that stage, the change of climate must be a necessity.

But never think for a moment that thereby a cure may be effected. A curative stage has long passed off, and now the only question is to anyhow pass the days in comparative comfort and peace.

For the purpose of Tubercular patients, it has been found that the seaside places are more beneficial than inland towns or villages. The reason has been told by Old school authorities to be exuberance of ozone gas (ozone being rather concentrated oxygen) near the sea. Of course, for ourselves, we do not pretend to know the reason, but advise our patients to select sea-side places for the purpose. Rare cases may be there which are improved in places surrounded by hills and jungles.

In this connection I should not refrain from suggesting to our brother practitioners that the selection of the locality for a change should, as far as practicable, be made on the *individual constitution* of the patient. The Law prevails everywhere. It is a remarkable fact that sea-side places are generally harmful to the Hydrogenoid constitution, i.e., a constitution having an aggravation in places where moist air prevails. To be more precise, the patients who have in their systems a predominance of sycotic symptoms, should generally be sent to inland places and Jungle towns, whereas the other class may find a good deal of benefit in sea-side towns. So, before sending a Tubercular patient for a change, we should fairly study up their constitution from our Case-Records and select the place accordingly.

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## EUTHANASIA OR PAINLESS DEATH

You cannot expect to cure every case of Tuberculosis and the reason has already been stated. Cases that you can expect to be cured, must have the totality of symptoms, on the basis of which you can select the curative remedy, but it is a remarkable fact that cases come for treatment, in which there are to be found only the *common* symptoms, and not the *individual* or prescriptive ones. I have already said that in each curable case, three classes of symptoms must be present. (see p. 62)

Now, in those cases, you are to do what you *can* do under the circumstances, with the object of giving as much relief as is possible. Here, you are to look the *local and painful* symptoms only, with their modalities, for a prescription. You need not take into consideration the totality of symptoms which, as a matter of fact, you are likely not to get at all. Because had there been anything like totality of symptoms, you might have thought of cure. But here, euthanasia is the only thing that can be thought of.

I should reiterate the condition in which all hopes of cure are to be altogether banished, and euthanasia is the only course that is left for the physician to resort to. *First,* absence or want of totality of symptoms, especially, the symptoms belonging to the first and second class, previously

referred to. *Secondly,* there are only the *common* symptoms that are painful and troublesome to the patient. *Thirdly,* intense weakness *attended with* a high grade of wasting, and products are thrown out in form of night-sweat, offensive sputum, and diarrhœa of fetid nature. There may or may not be appetite for food, but absolutely no repair, evidenced, if necessary, by loss of weight, in a gradual way. These are the *conditions* which must be present, along with no other *individual* symptoms nor any modalities, even of the *Common* symptoms and sufferings of the patient; so that the physician may be sure that he should have only to think of giving the patient as much relief as possible with the view of bringing in timely relief only.

Under such a circumstance, it will be more a torture to the patient to give him any high potency which might have done him immense good, had it been given before this stage of ultimation, but now the very same potency will tear down the patient and will do no good,—it will simply aggravate without producing any relief or reaction. You may think of 30th or, at the highest, 200th only. I have seen, most useful for the purpose is the 12th and many times, 30th. These potencies will always produce transient reliefs without any the least aggravation. Always encourage your patient, but make a clean breast of the affair before the true friends and relations by calling them aside. You need not tell about the real situation before the most beloved relations like the loving mother, or the true wife,—

they also should be given hopes, or else they may be pulled down at a time when their attendance to the patient is all the more necessary and helpful.

I would most strongly warn you against your allowing the use of anodynes, morphia, opium, or other stupefying drugs for the purpose of bringing in easy and instantaneous relief to your patient, under even the horrible agony and pain. These drugs actually burn the candle at both ends. You may ask, how? These drugs are deadening or stupefying, so that the patient, under the influence of these drugs, is only unable to *feel* the pains, though the condition is kept quite unchanged; and then, when their influence is off, the patient will come to where he was,—not only so, the pains will appear with double vigour so that the patient will come to all the more miserable situation. In this way, his energy that only flickers, at the time will be spent, without any the least good to his condition or his pains. Instead of using anodynes or morphines, if you use Homœopathic alleviating remedies they will palliate, without the least chance of aggravation, because they being so many potentiated remedies, have no untoward reaction as the crude drugs have.

You know, Homœopathic remedies are really blessings of God, because they *always* do good, and even if they are misapplied, they can do no harm, as crude matter there is none in them. I would suggest a few remedies which will do the utmost good under the circumstance and will lead your

patient absolutely in a painless way to the last stage of life. These remedies are *Lachesis, Carbo veg, Ars. alb., Secale,* and *Tarentula cubensis.* There may be other remedies like Lycopodium, Stannum, Thuja, Veratrum alb, etc, but the former group gave me the greatest help; the latter group may also be sometimes needful. Of course, the selection need not be confined to those two groups, as everything depends upon the condition, nature of the pains and the "so-called" symptom-totality relating to the locality and the nature of pains. The good-meaning physician is at perfect liberty to choose among his remedial armamentarium for the immediate relief of his patient.

When during the treatment of such cases, a particular potency is found to exhaust its action and some other potency of the same remedy is needed, it is to be remembered that anything like a big leap, viz., from 30th to 200th is always very serious. During the curable stage, such a jump is necessary and beneficent, but during the incurable stage, it is harmful, so that only a slight change in potency, by the process of graduation, should be made. For example, if you have used 30th at the first instance, and a changed potency is found needful, just put a few globules medicated with 30th in an ounce of pure water (better distilled) and shake in an up-down motion for, say, 4 or 6 times, and then give a quantity of this to your patient, and put the rest for future use, if necessary. So that so long a timely respite is to be found, that

remedy is to be used in that way. But always bear in mind that only a timely relief is what is wanted here and not a permanent cure, and you are to guide yourself accordingly.

The Homœopathic remedies can give the greatest amount of relief to your patient under *any* circumstance, without any the least detriment, whereas Allopathic suppressive drugs are always detrimental. Yet we have perhaps got only a half of the knowledge in the science of Homœopathy,—it being the divine science of cure, absolutely unlimited in its potentialities. Master has given us only so many hints, which must have to be worked out in an infinite way,—we have not been able to do much, except only a portion, and we hope our successors will do more and more, as generation after generation goes on. The book of knowledge is opened only to the pure in spirit. The physician who wants only to fill his own pocket, becomes by and by blunted in his brain, and all knowledge is denied to him,—that is the law of Nature. Love is the law of life, and so if you proceed on the way of love, with the object of doing good to His creation, it is sure that you will obtain all help from Him, so that you may be successful in your holy mission.

When you will be given charge of treatment of case of Cancer, Consumption, Lung Phthisis, etc under the incurable predicament, you are to see how speedily you can bring a relief so that you can earn a blessing from the Eternal Father. Do not make any the least delay, for the patient may be

really burning, as it were, in a blaze, and as soon as you can give him a soothing remedy, so soon there will be a calm and peace in his mind, and that calm and peace will be reflected upon you and will ennoble you. You need not expect much by way of remuneration from these patients, but you must have the reward in shape of God's blessings.

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# TREATMENT
# OF TUBERCULOSIS

The Treatment of Tuberculosis is the most difficult in comparison with that of other disease conditions, because it is a death-dealing process, and a mistake is generally very hard to be remedied, careless prescription may *accelerate* the process, far from stopping or aborting it. It has often been found that active Tuberculosis commenced *only as the result* of an unhappy prescription of a remedy which should have been used long long ago in the case. This happens where the destructive course has just commenced and a deeper remedy which should not have been used at the time, has been used, either in a hurry, or foolishly,—the patient's present condition or the baneful potentiality of the remedy used. This should be carefully guarded against.

I have repeatedly told you that the totality of symptoms is the only basis of Treatment. This is so important to be borne in mind, that a thousand-fold repetition is rather welcome. Because I have seen, during actual cases of treatment, even by the best brains available, that the principle has been put into utter oblivion, and prescriptions have been made on the basis of "Disease." I may be excused if

I say that the idea of "disease and its treatment" never leaves the brains of our Allo-Homoeo friends, and they, as if unwittingly or as if forced by an inertia, persist in *pathological* prescription and thus bring irretrievable injury on the patient .who has already taken to the destructive course in Tuberculosis. I state the true state of things here, and if I have done any wrong thereby, I may be excused, Pure love and nothing else, actuates me . to make the statement. Those physicians are my so many brothers and I have not any the least intention to hurt their feeling,—I love them from the core of my heart, I speak, out of love towards them, and towards the unfortunate patients who are in a serious and precarious condition in their lives—a condition swinging between life and death, when death actually stares in the face.

The Totality of Symptoms is the only thing that is needful, but I think the thing is not clear to many. I have seen many to say that "fever" is a symptom, that "diarrhœa" is a symptom, that the mucus raised by the patient is a symptom, and so on, and so forth. This is badly misleading, so I want to give you a clear understanding as to what is that totality of symptoms which is to be taken as the basis of treatment. The thing is so important that unless a fair idea is made of it, the whole purpose fails; and you know that however good your motive might be if you make a mess of the matter, you cannot be successful when engaged in actual treatment of cases.

**Totality of symptoms,**—Before understanding what is "Totality of symptoms," you must have to recall into your mind as to what "the disease" in the true sense of the term, is. The Disease is the disturbed condition of the Vital force. The prior conditions of Law-breaking and the sin-process as its result, need not be spoken of here, as they have already been dwelt upon in previous chapters of this treatise. Here, in order to understand what is meant by the "Totality of symptoms," which is the sole basis of a true Homœopathic prescription, the idea of what a disease is, ought to be made quite clear.

A Disease is the disturbed condition of the Vital Force, so that the Vital Force, under that condition, is unable to direct the various organs of the system to act in the true and natural way. They, of course, function. but in a *wrong* way, and so mal-function. These mal-functionings of the organs are the outward picture or external manifestation of the disease, and are technically called symptoms of the disease, So whenever there is any disease in the human organism, it is and must ·be expressed by "signs and symptoms," which are the outward picture of the internal disorder.

These signs and symptoms are most important, in as much as the totality of symptoms is to be found from among them.

"The signs and symptoms" above referred to consist of the patient's *feelings and sensations* as well as many things which are only the *crude results* of

The disease. In counting upon the totality of symptoms, we are not concerned with the crude results, but only with the feelings and sensations which are realised by the patient. Those *feelings and sensations with their modalities form the totality* of symptoms, upon which only, a prescription is to be based. That totality includes also, as a matter of fact, the *individual* peculiarities of the patient, as evinced or manifested by the disease. *Common* symptoms have hardly any value for a prescription. One illustration may be needful for clearing up our position: An actual case which got cured, through His Grace, under my treatment, is given below.

Case,—Sj. Ram Dulal, B.A., aged 27th years, who had been suffering from the premonitory symptoms of Tuberculosis, came up to me for his treatment in 1924, August. His father was a Colliery Manager, and Sj, Ram Dulal was, at the time, a student in the University Law College reading for the Law Examination. Since boy-hood, he had all along been and still was *susceptible to cold; though he wanted cold and cold bath.* Since 1922. he found that even a small amount of *intellectual labour used to bring in pains in the head* which would *aggravate mostly in the noon times and repeated cold bath, or sprinkling of cold water over the head used to ameliorate the pains.* A continued sleep for a few hours usually put an end to the head pains. He had *an inveterate constipation;* so much so that sometimes the anus would crack and bleed owing to bad tenesmus, and dryness of the

fæces. Mentally, he had all along been of *a deep depressed nature,* and even *would weep on the slightest cause.* Many of the lymphatic glands were found to have been in a swollen condition, though there was no tenderness over there. Regarding food-stuffs, he had *the strongest desire for salted things and juicy articles of diet. Always wanted to be engaged.* Rather thinly made. There was a slight tenderness in the small of the back.

The susceptibility to cold generally manifested in the nasal catarrh of watery nature associated with headache and profuse sweat. Formerly, the cold did not seem to travel down, but for two years last, the patient was being troubled with a dry form of throat cough and occasional feverish feeling too. Aching of the whole body used to accompany the "colds," and a distaste for food was prominent. The patient *wanted to keep alone rather* than in company, though so much depressed and full of melancholic thoughts. *Thirst for cold water and profuseness of sweat* were also much characteristic in the case.

Just see, here was a case in the premonitory condition of Tuberculosis. This patient, if unattended to and untreated, appeared to every physician, that he must manifest active Tuberculosis within a short time. His case was duly taken, and the proper prescription was made The signs and symptoms upon which the prescription was based have been given in italics. You will see that the remedy was based on purely "feelings and sensations with their modalities", and no patho-

logical changes, nor the results were taken into consideration at all. Even the involvement of the lymphatic glands, a great characteristic of a Tubercular diathesis was also not considered, and if the prescribed remedy really contained that condition of the glands, so much so, all right, but if not, there is not the least harm, and no change of prescription could be thought of, even in case that condition was never to be found in the remedy prescribed, and it is sure that the self-same remedy *must* cure. Of course, you have been able to understand that the prescribed remedy was *Natrum muriaticum* and the patient was cured with the help of that remedy of several potencies from 1m. to 50m. in course of one year and seven months, after which he was discharged as perfectly cured. The Tubercular process was cut short, and there was not any the least chance of his re-attack, as the remedy was very deep.

Having given the initial necessities before attempting to treat the cases, I am now going to give a short hint under each of the Tubercular remedies that are required for the treatment.

In case you find that a particular case in hand is similar to a remedy not included within the Tubercular group or a remedy that has never been known to produce Tubercular symptoms,—no harm. You must have to give that remedy and be sure, that remedy will do all that can be expected for the cure of the case. Cases have been found where a purely anti-psoric remedy was required and after

that remedy has been administered, a new picture of altogether a different remedy of Tubercular-nature, has appeared, and if that be the case, a new remedy according to the new totality is to be given now. One word more in this connection. You will find cases, where the Tubercular symptoms are dormant and kept hushed down by some miasm which is predominant at the time, and when you make a record, you may get a predominant totality of Psora or Sycosis or Syphilis. No anxiety, just prescribe upon the *predominant* miasmatic totality, and ere long, to your surprise you will find a perfect picture of Tubercular totality appearing when you· can prescribe upon the fresh picture and fresh totality. Never deviate from the totality of symptoms, but when there are more than one miasm in the system, the possibility is to get different totality at different times, after the administration of your remedy, according to the *predominance* of any of the miasms. So, always prescribe upon the totality of the most active or predominant miasm.

The eternal and unchangeable principle is that you are always to base your prescription on the totality of symptoms presented by the patient, and there is no failure. Always look to the symptom-totality and never to the name of the disease or to the· pathology produced. The symptoms to prescribe on are such as should represent *the patient as an individual,* and not the condition nor the pathology nor the changed tissues.

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# DIET AND CONDUCT OF LIVING

The dieting and the mode of living are very much important. Of course, these are more important for those patients that have only the diathesis stage and have not yet come up to the ultimated or active stage, because the former class of patients have a greater chance of life than the latter. If you wish to know only in a few words, I should say that these patients shall always take *Sattvic* and *Rajasic* food-stuffs and live a perfect *Sattvic* life. These shall have to be fully explained.

There are various types of food-stuffs in our country, all of which cannot be allowed to the Tubercular patients. Those food-stuffs belong to three classes, viz. *Sattvic, Rajasic* and *Tamasic.* All the three classes of food may give a good deal of energy and nourishment to the patient, but each of them has the tendency of building and producing a different type of *mental* condition, and though a good nourishment is given by a particular type of food, our system must follow the mental attitude produced by it. The energy and nourishment may be kept stable and steady in the system, by one kind of food, whereas they may be uselessly spent up by some other type of food by way of lending to the patient a lustful mood and by bringing in an

undue sexual excitement and involuntary nightly pollutions. So, the point is that a Tubercular patient should always keep himself far from this type of food. All exciting spices should have to be avoided. The *Sattvic* food-stuffs, for example, all sweet and ripe fruits, cows' milk, ghee from cows' milk, rice, wheat, vegetables, etc, are beneficial for him. Out of the *Rajasic* type of food-stuffs, the goat's milk, goat's meat may also be taken. Eggs of all kinds must be avoided, as they have the sure effect of wasting the system by producing intense sex-desire. The eggs belong to the *Tamasic* group of food.

Mind must have to be kept pure and tranquil and it depends much upon the nature of food. Our great and beloved Swamiji, I mean, Swami Vivekananda, used to daily quote the Sanskrit text from our Shastras, meaning, "purity of food keeps the mind pure, and purity of mind leads to higher perceptions." In case, *Tamasic* foods are used, the mind must seek for pleasures of lower and lowest types, so they must be avoided. *Rajasic* things though do not degenerate the mind, yet make it violently restless. Calmness or tranquility is what is needed, and only *Sattvic* and a few items of *Rajasic* foods will produce that. Purity, tranquility and calmness of the mental plane have the special efficacy of directing the man towards the higher plane of existence,—a desideratum awfully needed for the Tubercular man. Prayer should be practised in a regular way, because the prayer to God humbles the mind and can preserve a daily

communion with the Almighty Father, the Giver of all good and health.

A Tubercular patient must not engage himself in any controversy, because that has the sure effect of ruffling his mind. You know, it is the mind that manufactures the exterior, and any ruffle or wave produced within, must bring in a disorder in the functionings of the outer organs. The married patient male or female must keep separate. Tuberculosis, as a miasm, makes him all the more sexually prone, and so the patient must have to be careful on the point. Here I am going to impress upon you as to what is the true separation. Only the physical separation is not sufficient. A thought of wife, or a look at her lustfully, will break up the abstinence or Brahmacharya that is needful, and will certainly bring in the wasting and may set in a *process of wasting* which is really killing to the patient, as it were. Free air, (but not cold air nor gush of winds) is beneficial. Walking with slow strides, morning and evening, of course, in accordance with the patient's strength, is necessary.

The room within which the patient will sleep during the night, must be goodly airy, I mean, well ventilated, with an ample arrangement for the purpose of controlling the ventilation according to necessity and desire. It should be nicely decorated with divine pictures and paintings, so that before sleep, the patient may look unto them and serene and pure thoughts might fill in his mind. Before going to sleep he shall better pray to the Almighty

Father, that he may be cured under His mercy. This prayer must not be routine-like and superficial, but deep and sincere with the idea, that He is the last resort, the only friend, the true friend of all beings created, the Lord of Lords, the final repose, and the ultimate refuge. It is He that must have to be moved with prayers and tears before going to bed. Srimad Bhagavad Gita must be his constant companion and he must have to read it off and on, in order to keep, if for nothing else, the divine thoughts ever-kindling within.

There are many things and many food-stuffs which the T. B. patients may have a special liking for, and the question is, whether those things are to be allowed or not, and on what principle. One well-known fact is that it is the nature of the T. B. patients to be affected and aggravated by the very *things liked by* them. It appears as if Nature wants to accelerate their death issue as early as possible, because they might deteriorate Her creation by giving birth to maimed and degenerated children, who would not live long, but would or may similarly vitiate the society, and that seems to be the reason why such a strong morbid desire is found in them for things that aggravate their case. She had already tried Her utmost for their cure by producing and manifesting the totality of symptoms for a cure, but the patients did not pay proper heed when cure was at all possible. Now perhaps it is too late, and so She wants to send them away from the arena of Her creation as early as possible.

Now, our point is *to cure,* irrespective of the stage in which our patient may be, and so we would and should not allow those articles of diet or conduct. The desire is not *natural* in their case but *extremely morbid.* Whenever a Bryonia patient is found to be asking for cold drinks or a Lyco patient calls for warm and Chelidonium for hot drinks, these individual desires have *a value* of their own, for each of them belongs to the group of symptoms, technically called "totality of symptoms", and hence each of them is a guide to the curative remedy. Here, in the T. B. patients, the desires have of course a value but of a diametrically opposite matter, they being so many helpers in the process of death, and not all belonging to the "Totality of Symptoms", which is no more to be found; and so our aim being to save the patient, if possible, we cannot allow those which are aggravating, and leading the patient rather deathward, unless death is found sure and rather staring in the face. Our Rishis of Ayurveda also have enjoined on their pupils to allow the things under the circumstances where death is peeping at the door and so, not to allow would be any a cruelty,—and that is the principle. So where there may be any the least chance of life, those things must have to be forbidden.

One word more. The T. B. patients, generally when the curative limit is over, have a strong, rather over-powering desire for sexual intercourse and for enjoying meats. You will see that both are killing at the time. Waste of semen is death itself

and meats sadly weaken the heart. So both must be refused. The sex-desire, if allowed to satisfy, may bring injury in other ways, by affecting the female and it has the sure effect of injecting, as it were, the T. B, susceptibility, as also by bringing about a chance-pregnancy in her, having the possibility of bringing in an untold misery in future, owing to the birth of a sure tubercular child.

Finally, our main object being arresting of the waste as well as the storing up of energy of the Tubercular patient, the food-stuffs must have to be selected with an eye to the point that they must be most easily digestible. Not only the *nature* of the food should be such as can produce the purity of mind, but also it must have to be carefully seen that they are easily digestible. I have seen many of us prescribing such articles of diet that have the highest nutritive quality, but unless they are also very easily digestible, there is a great chance of bringing in intestinal disorders which are most difficult to check or cure at such a serious predicament in which the patient may be. Greatest care is needed, therefore when selection is to be made, specially because the individual characteristics of desire and suitability are so different in different individuals.

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## HINTS ON REMEDIES

The following remedies are to be carefully studied and their picture to be remembered. I have duly given hints as to the stage or stages in which each of these remedies is applicable. The students and the physicians will do well to look to *the picture* of the remedies given. These remedies are the most important ones, though a few others may also be useful.

**Abrotanum,**—The Tubercular course commences from the earliest childhood,—I think, cases are not rare, where the course begins from the very womb and the child dies before birth or sometime after birth. The cases where the course begins from the birth are to be treated and cured by the physician, by applying anti-psoric, and anti-tubercular remedies to the pregnant woman during her pregnancy. Still-born children are, in many cases, *Abrotanum* children, and if the pregnant women are duly treated according to *her* own peculiarities, which are a sum-total of inherited tendencies, the catastrophe may be averted.

*The intense sufferings, even sometimes a deadly condition, of the pregnant women during their pregnancies, are a hint that the child in the womb is the equal sufferer, and the would-be mother must have to be treated *Constitutionally.* There is a wrong belief in our

society that nothing in shape of medicine should be given to the pregnant women during their pregnancy, but that is a serious mistake. So far as our treatment is concerned, the master has said, and myself being an humble follower of his, I say with as much confidence as I can command, that the pregnancy is rather *the best time* for their constitutional treatment with the view of correcting the mother as well as their children in the womb; because Nature fully manifests during this time the innermost wrongs in their constitution, so that they are very rich in their symptom-totality.

Now, to the *Abrotanum* child. The *wasting* in spite of good appetite and due nursing is the earliest features to be attended to, and the peculiarity of the wasting is that *it commences from below and rises upwards.* It is just 'the opposite of *Lyco, Natrum mur and Psorin* emaciation. The condition of the child is said to be a *Marasmus,* but it is a name only, and if the above peculiarity is there, you can depend on it. The Abrotanum child is badly *chilly.* This wasting, if not cured, will put the child to an early death. The marasmus is only *consumption brought on early.* The child may have a diarrhœa or a constipation, but the wasting continues, unless and until it is reduced to only a miserable frame of skin and bone.

The work of the remedy is wonderful. I know, it never fails. I treated a child, of one year and a half, that had been suffering from marasmus. The students of my Post-graduate class and myself too, thought the

case to have been altogether hopeless. But we wondered to see that only three doses of 200 brought a thorough change in the child and another dose of 1000 perfectly cured.

**Anacardium,**—It is a tubercular remedy, but not easily detectable. The mind is befogged first of all, the memory almost lost, and the patient becomes highly sensitive, even to harmless remarks. He is very easily inflamed into a rage, must swear and curse, with a vehemence of temper, hardly to be found in any other remedy, except *Hepar Sulphur, and Nitric acid.* The tubercular course begins in the stomach, and relief of all the symptoms is obtained from eating. The emaciation is just in proportion to the amount of food taken in order to relieve the extreme gone-ness in the stomach region. The ultimation of tuberculosis is found in the ulceration within the stomach. The mental symptoms are the first to come in, and then the physical symptoms of goneness and appetite which are sought to be relieved by an inordinate quantity of food, and this, in course of time, leads to the stomach ulceration. After the ulceration has formed, the chance of cure is very remote.

The Anacardium stomach pains commence just 2 or 3 hours after meals, i.e., when the stomach digestion is complete and the stomach is empty. The pains continue unless the stomach is re-filled. *Nux vomica* has the pains *during* stomach digestion, and so they occur immediately after meals and continue for 2 or 3 hours after.

The mental aberration has the peculiarity that the patient feels himself to be under two different wills; he seems to hear distant voices.

Brain aberrations and lung-phthisis or any wasting and consumptive process are interchangeable conditions. These are *different aspects* of Tuberculosis.

**Antim ars,**—The remedy or its patient has *a mixture of somnolence with restlessness and anxiety.* On account of the presence of Arsenicum element, the remedy has turned deeper than *Antim tart.* The chest gets a continual accumulation of sticky mucus, and when the patient coughs, it appears that a cupful of mucus will be raised; but nothing comes up. During coughing, the patient gets cold sweat over the forehead, and he is quite exhausted. In Ant. tart, characteristically there is no thirst, though exceptionally there may be, and if it is there, it is for good quantity each time; but the patient has no taste for water. In Ant. ars, there is thirst as in Ars. alb, that is, for a small quantity of water,—only a sip or two for moistening the mouth. Both Antim tart and Ant. ars are ehilly patients. The tongue is moist, rather salivating in Ant. tart, but it may be dry in the combination.

The tubercular diathesis of the remedy consists in this, that the patient *cannot avoid continual attack of coryza and accumulation of mucus in the chest*; on comes, then, the wasting, though imperceptibly in a slow and gradual process. It is unfortunate that the medicine, even the Ars. combination, has not the depth enough to

cure the patient during the diathesis period, and the help of deeper medicines is required, for example, of *Lycopodium, Carbo veg,* or *Phosphorus,* even *Tuberculinum bovinum.*

Ant. tart and Antim ars have a nausea or vomiting too, with want of appetite. The nausea or vomiting is relieved somewhat on lying to the right. Moreover, in each of them, there is flapping of the *alæ nasi,* indicating the difficulty of breathing. Both of them are averse to rains and rainy season. Though they are chilly, yet they feel much relieved, specially during the spells of difficulty of breathing, from free open air.

It may be useful to know when those remedies come in the completing the cure. *Lycopodium* comes in, when the Lyco group of symptoms appears, viz. constipation, tympany, aggravation from 4 to 8 p.m., good appetite but a few morsels filling the patient up, flapping of the alæ nasi, a desire for sweets and hot food-stuffs, etc. *Phosphorus* characteristically lies to the right, has a strong desire for *ice-cold drinks,* good appetite, goneness felt in the chest and stomach, flapping of the *alæ nasi,* fondness for salty food, desire for company, etc. *Carbo veg* stands a good complementary to both of *Lyco* and *Phos,* and is specially useful if there is a *continued trail of diseases* from a few months or even a few years back. The patient is badly exhausted. specially from any exertion,—mental or physical, and has an orgasm of blood towards the upper part of his system,—the orgasm ending in a profuse sweat on the forehead. There may also be hæmorrhage from any of

the natural outlets of the body. The whole system is dull and weak, exhausted too, but no reaction even from the goodly selected remedies. *Tuberculinum bov,* should be thought of, when there is found no relief from any of the best selected remedies given so far,—the symptoms to be depended upon have been given under the remedy, which should be consulted, towards the end.

**Arg. nitricum**,—This remedy is very useful during the *diathesis* and even when the spot for manifestation of the ultimate has been *selected* by the tubercular miasm in the system. Two regions are specially susceptible in the patient of this remedy, viz. throat and intestines.

*During* the *diathesis,* there is evidently a process of *wasting, drying up* and *withering on and on,* and the patient ie unable to recoup with all his efforts. But all the three periods of life must have to be considered, viz. early age, youth and procreating periods of both male and female. The remedy is very deep and not only so, much trouble and disappointment may be averted by its timely use, and so I want to give a good estimate of the remedy during each of the periods and circumstances.

*Marasmus,—*During the early age, marasmus is a prominent feature of the remedy. Wasting and withering, no gain in flesh, stands a bold symptom, and the parents and the physicians are given a good and timely warning, so that a careful and true treatment

should be commenced. Much of the valuable time during this condition is wasted on account of the unscientific, rather senseless advice of the Old School physicians for rubbing Cod-liver oil over the body of the child and also giving it internally, with the ostensible view of "toning up" the child. They do not know, nor can they detect, even wiih their much vaunted instruments of precision, where the plague spot lies, or which of the systemic crews has got slackened, but must persist in their so-called "scientific" method of thrusting the "precious" drug. That there is a deeper wrong, i.e., the vital dynamic disorder, they are unable to comprehend and correct, and so are in the habit of fighting with the results that are palpable to their crude sight. However, the symptoms during the diathesis in the early age, are the strong desire for sweets which again aggravates, a good appetite but without any power to digest, and a diarrhœa with tympany and passing of profuse flatus during stool, as well as violent eructations, and a continued process of emaciating and wasting,—progressing for months and even for years.

*Adult condition*—During the youthful years, Arg. nitricum gets hoarseness of the voice, and a dry coughing generally aggravating when using the voice, specially in the high notes. Both the *metallicum* as well as the *nitricum* have the peculiar tendency of commencing the tubercular process in throat, and the first stone of that formidable disease is inlaid in the throat region. The patient does not care at the first stage, as simple hemming and

hawking or only occasional clearing away the throat brings in an immediate relief; but by and by wasting ensues, and ulcerations on the spot complicate the condition, The flatulent dyspepsia with constant eructations greatly aggravates the wasting process. The patient feels a splinter-like sensation in the region, like *Hep. Sulph, Nitric acid* and *Silicea*; but all of the three remedies are chilly, whereas, Arg. nitricum wants fresh air and cold bath. The exact condition has very nicely been put in a few words by Dr. T. F. Allen,—"chilly, when uncovered, but feels smothered, if wrapped up." Yes, that is the true condition of Arg. nitr,—he must have the fresh air and want the open and fresh air to blow upon his face, but feels chilly if the air touches his body. Yet if he covers his body, he will have an uneasy feeling,—a bit of breathing difficulty. This is a *tubercular characteristic,*—craving for something which does not give him any satisfaction, but rather aggravates the case.

Now, if the throat is cauterized with the help of crude Arg. nitr, i.e. Silver nitrate as is often done under the suppressive method of the Old School, the Tubercular process gets accelerated. *Natrum mur* is an antidote, to the harm produced by the cauterization, but in most cases, it cannot do anything and the Tubercular process sets in. Natr. mur is also its general complementary.

Mentally, it is *badly apprehensive for the future.* Greatly *impulsive,* and the patient wants to do things *with a nervous hurry.*

**Arsenicum album**,—Though this remedy does not fit itself with the patient during *active* Tuberculosis, yet it prepares the soil for oncoming of the process. The nature of Ars. is, you know, highly anxious and full of fears, and so is just *opposite to* the typically Tubercular nature. The matter is to be explained in a few words.

It is generally known that a typical Tubercular patient is quite careless about the consequences; even knowing full well that he is running fast in the destructive course, and that his ease may end fatally, he is never perturbed about the fact, far from *being anxious.* Arsenicum album is intensely anxious and has a fear of death; the like of his mental condition is never to be found in any other known remedy. So the question may arise as to how may the remedy be required in Tuberculosis. Quite true, but there are *conditions* in which the remedy can do good, and I am going to give you a hint about them.

During the Tubercular diathesis, i.e. before Tubercular break-down comes up, there may be found a group of Arsenicum alb symptoms with respect to any ordinary disease condition, as you fully know that Tubercular patient is always of low vitality. The patient *himself* may not stand as an Ars. alb individual; but *the group of symptoms* may unmistakably call for it. Repeated attacks of such diseases calling for the remedy, just prepare the soil for the oncoming of Tuberculosis. Then again, during the *active* Tuberculosis also, the same

thing may occur, viz, the whole *patient* may not fit in with the remedy, but still the *symptoms* may require its use, with the result of, at least, a temporary respite. Specially, during the incurable condition too, I have seen many cases to present Ars. alb group of symptoms and here also a timely relief can be given with the help of lower potencies.

Ars. alb, though particularly and predominantly a *psoric* remedy, has also the *syphilitic* taint in it, as indicated by the ulcerating property in the remedy, with a high grade of excoriation and offensive discharges.

Lastly, Ars. alb patients generally present the symptoms of *Ars. iod,* when actual Tubercular course is taken up by them. Ars. iod, is a positive Tubercular remedy and has almost all the symptoms of the premonitory conditions of the dire disease.

**Ars. iodatum**,—This remedy presents almost all the symptoms of *active* Tuberculosis in its inception. Profound prostration, rapid and irritable pulse, fever off and on, easy and debilitating sweats, emaciation, frequent diarrhœa, etc. are the symptoms and conditions that appear, along with a hoarse cough. The remedy has generally a good appetite for food. Some Ars. iod, subjects are *hot* and others again are *chilly.* In any case, they cannot stand *extremes* of temperature. They want doors and windows open, yet cannot stand the open air, if it is *cold.* All the complaints are worse from bathing. The special characteristic is that, in

spite of extreme exhaustion and tiresomeness, they want *movements.* Over-sensitiveness and fear are the features.

Salivation and swelling of the maxillary glands are invariably to be found during the active stage. Irritability and wasting follow. The slow fever and night-sweats are found in the ultimated condition.

Many cases under the incipient condition have been cured by me with the help of this remedy, complemented by *Tuberculinum bovinum.* The symptoms of Arsenicum album and of Iodatum seem to combine in this remedy and involvement of the lymphatic glands is an addition to Ars. alb, which markedly leads the patient towards Tuberculosis.

**Aurum meta**,—is not a Tubercular remedy *per se*, though it prepares the field for oncoming of the malady in the *progeny,* more than in *the self.* Of course, being a Syphilo-mercurial remedy, it brings in caries in the bones and involves the glands of the system most destructively, yet there is hardly any direct attack of the lung-tissue in it. The most turbulent action, in the Tubercular way in the patient himself, that is found in the remedy, is its attack of the brain substance, perverting the *will directly* and then the *Intellect secondarily.* The loves and affections that keep the human being attached to his family and the external world, are practically banished from his heart. and the patient feels that he came to the world for nothing, he being

altogether useless to any body, A deep melancholy overtakes him and he broods and broods, and at last is led to suicide, as if involuntarily. The reason is, that the Intellect also being dulled, the patient is quite unable to ascertain the nature of the act he is going to commit. Those patients that turn positively insane with the predominance of depression and melancholy, suffer from the *brain-wasting,* showing the nature of consumptive or tubercular nature of the remedy. Thus far over *the self.*

But the action of the remedy on the progeny of the man who is the patient of this remedy, unmistakably proves its tubercular nature, and its power to affect them in the way. The Aur. meta children are positively *pining and wasting,* from the very start of their lives,—their liver and their heart are found to be out of order; first torpidity and then *mal*-functioning are produced in those organs. By and by, the organs are enlarged and indurated, and get out of repair. The extremely low-spirited children, without the boyish mirth, pining and pining, and of horribly irritable nature are the fit patients of this remedy, and so far as my experience goes, I am sure that unless early steps are taken, these patients die of active tuberculosis within the teens. Profound depression mixed with an intense sensitiveness is the picture. A do-nothing student without the least memory, unnecessarily hurrying up, aimlessly busy or brooding and brooding and doing nothing. A stench, an offensive effluvia comes from their genitals and even from the

mouth. But the Tubercular current is slowly, imperceptibly and stealthily flowing in them,—a thing to be noticed not only in non-growth as in *Baryta carb,* but *positively wasting* all the while. These children never get the natural glow in their faces.

Aur. meta females are never successful mothers and the Tubercular activity begins from the very first delivery, bringing in either puerperal insanity or lung-phthisis. Two things are to be marked in them,—(1) offensive stench in all the feminine discharges, and (2) a deep melancholy mood which is impossible to cheer up or soften,—the patient herself not knowing the reason why she is so sad.

**Bacillinum**,—Notes on Bacillinum shall be given under *Tuberculinum bovinum.*

**Baryta Carb**,—is a Psoric and Tubercular remedy, its Tubercular element manifesting in the early childhood in more forms than one. The dry consumptive type of manifestation commences in its *dwarfish* nature of *physique* and *mind,* where the development seems to be thwarted or stunted and set back. Then, the throat region is affected, tonsillitis with swelling of the neighbouring glands appears, and a tendency to frequent attacks of quinsy is found. By and by, the whole glandular system is invaded, and a peculiar type of dull pain appears in the abdomen after every meal. The nature of Baryta is that it is shy of strangers. Want of memory is found to be prominent, as the child is

capable of neither learning anything nor remembering what he has already learnt. Emaciation is rather prominent during early boyhood, and if steps are not taken at the time, it is just likely that active Tuberculosis develops during youth. The tonsils also go on enlarging and enlarging and they indurate. A dry cough which is relieved in no position except lying on the abdomen, is found in these patients, and emaciation, childishness, enlarged glands, indurated liver, extreme chilliness, soreness in the mesenteric glands, etc. are the prominent features. The Tubercular developments are found to start in the throat, as in Argentum, as also to end there, with a steady hoarseness and huskiness of voice. Barking cough, night-sweats, asthmatic breathing and a low type of evening fever come in towards the end. Lung tissues are hardly ulcerated in Baryta carb.

One word as a warning, I wish to say here. I had a case of Lung-infiltration and Asthma, with emaciation, I learnt that it started from suppression of the offensive foot-sweat during boyhood. From the mentals I fixed upon this remedy, which was applied in 10M. and as soon as the foot-sweat was restored, all the troublesome lung-symptoms with breathing difficulty, etc. were gone. No other remedy was required for the case, and another dose of CM. cured the foot-sweat as well. The gentleman is now an employee of a Calcutta Bank. There are many remedies having foot-sweat, and *it should never be suppressed.*

Baryta carb is in inimical relation with Calc. carb.

**Calc. carb**,—is pre-eminently a Tubercular remedy, and attacks the glandular system from the very early childhood, impairing the nutrition in a considerable way. Increased local and general perspiration, swelling of glands and a plethoric condition are the features. The child has the peculiar craving for eggs. The *exhausted, jaded, worn-out,* condition of the system gives the early warning. During childhood, a fat, fair and plump look, rather gives the parents an assurance of sound health, but easy perspiration, specially in the forehead and during sleep, sour stool, sour vomiting, inability to digest milk, and over and above, the extreme susceptibility to cold, *damp* or dry, give a rude shock to the assurance of good health. Moreover, any disease symptom is found to have frequent relapses. These are the symptoms and conditions during the *diathesis* period.

The remedy has the characteristic of forming abscesses in deep muscles, and of bringing in a pyemic state. If this condition is suppressed by force of un-homœopathic methods, the active Tubercular condition may come in, and two are the points where active manifestations may appear, viz., (l) throat, and (2) chest. In the throat, a painless hoarseness starts, and this goes on from bad to worse, leading unmistakably to Tubercular laryngitis with much rattling of mucus,—much rattling in the throat and in the bronchial tubes, and in the chest as well. The chest is found to be greatly infiltrated, and a

dyspnœa appears, greatly aggravating on exertion. specially *on ascending,* as well as from walking against the wind.

When the Tubercular infiltrations are on, the chance of cure stands remote, and more and more remote, as the case proceeds on and on. The thing is that you are to *prevent* these things coming on, and should commence treatment *long before* they come on. As soon as you get the constitution of Calc. carb, the characteristics of Calc. carb, do not wait for the results coming on, because, at that stage, you will hardly be able to cure. In Tubercular cases, do not allow the active manifestations appearing in the case, but try to prevent their oncoming by correcting the constitution beforehand.

In the case of *females,—relaxation* and *tiresomeness* are the features associated with *profuse* menstruation. Now, if the Calcarea group of symptoms are found in the female, this remedy will prevent the oncoming of consumption from the inordinate draining of blood from the system during each menstrual *nisus.*

**Carbo animalis**,—The Tuberculosis of this remedy is of course rare; though I have met a few, and could cure only some of them. The nature of this remedy is that the patient is *abnormally exhausted, weakened, quite disproportionate* to the amount of discharge of any type. This peculiarity is a sign during diathesis, and must be guarded against, otherwise full-fledged Tuberculosis is to be expected. Tuberculosis of this remedy is perhaps only to be found

amongst the child-bearing females and the active stage is found to start from a delivery. Of course, this is in accordance with my individual experience. Only two cases came up to me for treatment, after the menopause, and I could do nothing in those cases. Carbo ani., Tuberculosis is rare, very rare, as I have told you already. The discharges are highly offensive and sanious.

Cancer of the breasts and uterus is also there in the remedy, with a severe burning in the affected spots. Cancer is only a form of Tuberculosis. In any form, the above peculiarity of the remedy must be present. Night-sweats of offensive nature are found in the remedy, greatly exhausting the patient.

**Carbo veg**,—It is not in itself a Tubercular remedy, but it can lead the patient towards Tuberculosis. There are two very peculiar characteristics, viz. (1) want of reaction, so that the patient can hardly recover from some serious type of acute illness like Pneumonia., Bronchitis, Pleurisy, etc. and regain his previous original healthy condition of his body; and (2) Intense susceptibility to bleeding through almost all the orifices of the human body. These two characteristics of this remedy are apt enough to place the patient in such a condition that Tuberculosis can make an easy inroad into his system. Vital force gets, by and by, quite exhausted, and the patient gets cold extremities, and due to constant orgasms, he desires being constantly fanned, and fanned *hard.*

Then again, the simplest food disagrees, so that the patient suffers from excessive accumulation of gas, in the stomach and intestines, with hardly any relief from eructations.

At last comes in the Tubercular symptom,—"patient craves things that make him sick."

The Tubercular course, in the remedy, seems to commence from any Pneumonia, Pleurisy or Bronchitis, which is rather neglected, and the trail of the disease continues in the original spot of attack. Repeated hæmorrhages my come and the vitality of the patient gets more and more enfeebled, orgasms also increase, and soon the last days come up and close the scene.

Sometimes the Tubercular diathesis commences in the throat with painless hoarseness, with a deep rough voice, failing on exerting it, and aggravating from damp evening air.

During the advanced stage of Tuberculosis, Carbo veg has the sensation of great weakness in the chest, sometimes with burning as from glowing coals.

Its complementary,—is *Kali carb* during the active stage, but before its oncoming, *Lycopodium* may do good work as a complementary to Carbo veg.

**Cistus canadensis**,—lt is often a neglected remedy, and its use is generally substituted by Calcarea carb with which it has a great similarity. Both are extremely chilly, exhausted from even the slightest exertion and from affections involving the lymphatic system. Both

of the remedies have the palpitation with a difficulty of breathing on going up-stairs.

Cistus is a scrofulous remedy *per se*. Swelling and suppuration of the glands in the neck and below the throat, enlargement, hardening and suppuration or ulceration of the glands are the prominent features. If these are in any way suppressed, active Tuberculosis follows. Otherwise, a slow course of Tuberculosis goes on and a daily evening fever commences to run with extreme chilliness as a prominent symptom. Mothers get indurated glands within their breasts, and many times those glands suppurate and ulcerate. The involvement of glands, their induration and suppuration are the characteristics of this remedy. Skin may be full of eruptions, and has an insatiable itching and *crawling* all over.

**Ferrum phos**,—It is not in itself a Tubercular remedy, though it has the great predisposition to chest disease and hæmorrhage of bright red colour. It frequently happens that the Ferrum phos subject is attacked with Bronchitis or Pneumonia; and in case the suppressive treatment is adopted, the Tubercular course commences with frequent hæmorrhage of bright red blood. The patient has generally the Phthisical inheritance, and is therefore not only chilly but always susceptible to cold. The patients of tubercular inheritance are generally of very low vitality. The tendency to frequent hæmorrhage is its worst feature. Exertion aggravates,

but slow motion brings in relief. It has flushing, and its head pains are relieved by cold applications.

So, this remedy prepares a fruitful soil for the oncoming of Tuberculosis, rather than itself being a Tubercular remedy.

**Fluoric acid**,—A Fluoric acid patient is a morbidly buoyant patient, having no idea of responsibility, rather, *unable* to feel the responsibility, always gay and cheerful, but of an unnatural kind. This condition of the mind is due to Syphilo-psoric or mercurial inheritance. He always likes to move about most energetically. This is like the strongest light given out by a flame before it blows down. Because, the Syphilitic or mercurial inheritance has already given a death-blow to him, extremely devitalising the life, and the Tubercular degeneration is just ahead. Under such a circumstance, the small energy that is left is spent up by unnecessary movements and exertions. After a few years, on comes the Tubercular process in form of Lung Phthisis, Cancer, Consumption, Bone-caries, and Necrosis, Abdominal T. B., etc., etc.

A Fluoric acid patient is unusually hot-blooded, though during the period of degeneration, he is found to turn chilly. Before that a certain amount of heat always evolves from off his body, though the thermometer reading will give you quite a normal temperature. It is only the body-heat. He wants cold, cold air, cold food, uncovering; warm rooms he wants to avoid, as they suffocate him; like *Pulsatilla* and *Sulphur,* he gets

his feet burning and desires to keep them in cool places during the night. The discharges are acrid and excoriating.

Fluoric acid has a great influence upon the bones, nails, hair, teeth, etc.,—the lower tissues of the human body. Mentally he is low, very low, and is prone to vicious practices. He has the violent sex-propensities which only lead him to degeneration and destruction.

In the anal region, it brings fistulous ulcers, which, if suppressed and operated, only accelerate the serious tendency towards Tuberculosis and death. Detailed symptoms may be had from the Materia Medica.

**Hepar Sulph**,—is not in itself a Tubercular remedy, but it can lead to Tuberculosis, in case it is mis-applied. It is anti-syphilitic and anti-psoric, and has the deep tendency to suppurate out the foreign bodies imbedded in the tissues, as Silicea has. This suppurating influence sometimes may produce an alarming condition where there are Tubercular deposits or encysted tubercles in the lung tissue, because it brings in suppuration in the lungs, and so Tuberculosis begins.

Hepar sulph is an exceedingly chilly remedy, and bas the anti-syphilitic virtues, when symptoms correspond. It is extremely sensitive, both physically as well as mentally.

Hepar sulph should never be used when the active stage of Tuberculosis is apprehended or threatened to commence, for it may speed up the death process.

**Iodine**,—It is a Tubercular remedy of first order. The symptoms also are clear-cut and so the physician can very easily select the remedy. It is as deep as it is slow, in its action. The grand characteristic of the remedy is *continued emaciation and loss of flesh notwithstanding voracious appetite and a good deal of eating.* The patient only *feels better* after eating and that is all. He gets thin and thinner all the while, unless and until he is the stick of a man.

Violently restless and anxious. He is most anxious when at rest. Must move and be busy. But he is anxious only for *the present,* unlike *Arg. nit* which is anxious and apprehensive for *the future.* Depressed and melancholic. Badly impulsive. Intense desire for cold, cold air and open air, and relieved in every way from cold and cold bath.

The glandular system, specially the Thyroid and Sub-maxillary glands are invaded and enlarged, except the female mammary glands which are rather dwindled.

Extraordinary susceptibility to coryza, with fluent and hot nasal secretions, generally *hot* yet *dry* skin; rush of blood to the head, with vertigo, is a strong feature. Liver and spleen enlarged with white-coloured stool. Jaundice with enlargement of mesenteric glands. These are the features.

During the active stage and sometimes before this, the Iodine patient generally gets his larynx affected with hoarseness and dry cough. Palpitation; slow afternoon or evening rise of fever heat, blood-streaked

sputum, etc., come in slowly and gradually. It is also found that the break-down or the active stage begins from an attack of mal-treated Pneumonia which appears mostly in the right side.

The remedy is complemented by *Lycopodium* and *Tuberculinum bovinum.*

**Kali bichromicum**,—is not a Tubercular remedy *per se,* but it can wonderfully relieve when there are stringy discharges during the active stage of Tuberculosis. lt cannot cure, unless the remedy is indicated and administered long before the active stage comes in.

**Kali carb**,—It may be said to be the king of remedies that are to be used during this *diathesis* state of Tubercular patients. Though it is also used in *active* stage, but so far as my experience goes, I have always found it to be truly more curative in the *diathesis* stage in the way of aborting the process of Tuberculosis than in the later stage when cavities have already been formed in some portions of the lungs.

You should always remember that this remedy *does not cure without aggravation.* It is a great characteristic of this remedy and so it should be used with a good deal of caution, not only with regard to the nature of the patient but to the stage of the disease as well. It is a thing which should be borne in mind, otherwise more harm is done than good. Not only so, the patients are sadly terrified just on the approach of the

aggravation, and the friends would advise them to leave your treatment and seek relief elsewhere, so that you will certainly be deprived of the opportunity for doing good to them. Homœopathy is generally given a trial to, as the last resort, and you must have to see that relief possibly ensues from the start; moreover, a good deal of tissue-wasting, which is not at all desirable in your patients of Tubercular type, must have to be apprehended in case of Homœopathic aggravation, and that waste is not at all desirable. I have seen so many cases turned up to me, from even the ablest hands, after the aggravation under Kali carb high, and hence my warning.

Kali carb is mostly efficacious in the female T. B. cases. The first break-down is to be expected in their cases, from the *early profuse* menses, and specially from the *child-bed.* Profuse perspiration, constant back-ache and intense weakness,—these three symptoms during the 2nd to 5th months after delivery give the start. After this, they commence to get slow and low fever towards evening. Wasting and emaciation, of course, come long after, because Kali women are generally fleshy and so they do not *appear* to be wasting, though actually they have been losing for a long time past,—the *internal* weakness, and exhaustion on even a slight exertion, give the timely indication. Then, after some time, night-sweat and aggravation of all symptoms towards the dawn and early morning show themselves and give a warning to the guardians and physicians that a serious disease has come or is oncoming. Kali carb patients have a desire for sweets amongst the articles of food.

During the *active* stage, Kali carb is found to affect the front lower right chest, with soreness, stitching pains, restlessness, extreme irritability alternating with violent despondence, dire sensitiveness of mind and body, and salivation. Ulcerations in the nostrils, stuffing up in the nose, nausea, chilliness, extreme anxiety felt in the stomach, cavity formed in the above spots with stringy mucus and fetid pus, etc., are the features. Towards the end, the lower lids are found to swell like bags of water, and lienteric diarrhœa closes the scene.

It is a remarkable fact that Kali carb patients, male or female, are extremely exhausted from coition. They .are specially exhausted from coition. They are specially affected in *winter.*

Amongst the complementaries, I can strongly recommend *Carbo veg,* which has done wonderful service to my various patients of this remedy. Space permitting, I would like to illustrate its use by giving you a few Case-reports. *Carbo veg* is an excellent remedy, specially where hæmorrhage is a prominent symptom in the case. See case No. 6.

**Lachesis**,—Though the remedy cannot be said to be of truly tubercular type, yet it has many developments which are of *tubercular* nature. The Hæmorrhagic tendency being the nature of almost all the serpent remedies, they may have such developments. The tubercular developments of this remedy generally begin from an attack of Diphtheria and its suppressive treatment. The weakest point of Lachesis and *Lac caninum* is the throat, and inflammations set in at

the spot off and on, and unless true symptomatic treatment is followed, the trail continues, as in the Pneumonia cases, and tubercular symptoms come in. Bleeding from the various orifices complicates the condition and enfeebles the system. After this, slow fever is found to develop and the patient steadily travels in the tubercular process.

Summer is the time of aggravation of all serpent remedies, though extremes of any temperature affect Lachesis. There is a general aggravation after sleep. It is complemented by *Lyco.* During active developments, Lachesis cannot do much good, but other remedies must be sought for according to the totality of symptoms, present at the time. *Tuberculinum bovinum* many times helps.

**Lycopodium**,—Adapted to persons intellectually keen but of weak muscles. All its disease symptoms centre round the weak digestion and production of much gas in the stomach. Emaciation and withering are the first indications. Continual craving for warm, rather hot things for eating. It has right-sidedness, and so its complaints run from right to left or originate and keep on in the right side. Liver is organically affected, and the patient lies to the right. Lyco wants cold in the head but warmth in the stomach. It is very much deep and progressive, and therefore needful in protracted and continued chronic diseases.

The Lyco patient is melancholic, timid and much apprehensive. He is *unready* for handling new things,

new occupations, and fears he would be unequal to the task, though he can fairly do, if once he undertakes the work, like *Silicea.* He fears he may break down under the stress, but as a matter of fact, goodly succeeds. Memory much defective, and so has no self-confidence.

The Tubercular developments of this remedy may often be averted, as a long time is allowed to the patient, as well as to the attending physicians, for cutting off the process leading to them. In other words, Lyco patients are found to remain in the diathesis stage for a long time.

The emaciation is the first symptom manifested in the Lyco patient, and that emaciation generally commences on account of the disorders in the digestive sphere. The digestion is badly deranged with extreme acidity associated with tympany and constipation. All the conditions are typically aggravated in the afternoon. Liver is deranged, there may be pains, specially towards the right side of the stomach and abdomen, timely relieved by hot and warm drinks. This condition continues for some time and then emaciation ensues, with a tendency to take cold, time and often, with stuffing of the nose and difficulty of breathing.

The Lyco patient has a tendency to be affected with Diphtheria, the weakest spots being found in the right side, all through, and therefore the remedy is called "right-sided." Ulceration may commence in tonsils, or the vocal bands, and laryngeal Tuberculosis is to be mostly apprehended.

Here, the Lyco patients having a tendency as stated above, a certain amount of care is to be taken by way of never suppressing the throat symptoms, as any suppression will easily lead the patients to tuberculosis, either laryngeal or developed in some other sphere, like lungs, intestines or brain. Lung-phthisis generally commences from the Allopathic or suppressive method of treatment followed during Pneumonia or Broncho-Pneumonia, and a trail, in form of a soreness or an occasional pain continues from the time onwards, developing at last, an ulceration on the spots. Infiltration of the chest, flapping of the nostrils, acidity, constipation, etc. are prominent symptoms. Of course, right lung is mostly attacked. The patient cannot lie to the left.

The point to be remembered is, that a good amount of time is allowed for a cure of Lyco patients. It has no galloping speed, but rather a slow one. Not only so, a good deal of symptoms manifests, for helping the prescription and eventual cure.

**Mag. carb, & Mag. mur**,—These two remedies are, though not truly tubercular, apt enough to lead the patients to the Tubercular manifestations during boyhood and youth, which are rather the ultimated condition of liver disorders. The patients of these two remedies get liver diseases and a rickety condition of the system, and the tubercular diathesis is found to be just inlaid at the time. Some patients die in the very childhood and they are declared to have died of "Infantile Liver"; others that get suppressive treatment go on emaciating

and emaciating and within the teens they are found to get slow fever, voracious appetite, fearful enlargements of liver, palpitation of the heart, etc., etc. and succumb in the youthful periods of their lives.

A few points ought to be remembered in connection with the patients of these two remedies, viz. (1) Mag. **carb** is generally loose, full of sour stools with a good deal of tenesmus during evacuation, whereas the **murate** is badly constipated though tenesmus is the common feature amongst the magnesia group; (2) Rest aggravates and movement ameliorates; (3) Both have a craving for meat and sweets and an aversion to milk; (4) Badly irritable mind they have; and (5) Patients are puny, dried up and emaciated with rather a large head.

**Manganum aceticum**,—The most threatened spot for manifesting Tubercular symptoms in this remedy, is the larynx and trachea and last of all, the lungs. Tuberculosis starts up in the larynx, and the hoarseness, rawness of the larynx with loss of voice, are the premonitory condition, when they come up recurrently. Damp weather aggravates and positive laryngitis commences. Recurrent cold and soreness in the larynx are the features. Constant accumulation of mucus easily raised in mouthfuls. Hemming and hawking all the time, aggravating in cold and cold weather. The patient is sensitive to cold and is decidedly chilly. *Argentum meta* is to be studied with this remedy, which has the day cough,—the cough of both the remedies is ameliorated *by lying,* specially Manganum has it.

The special subjects for Manganum Tuberculosis are the young chlorotic girls with very scanty menses all along, say, up to the 17th or 18th year,—pale, waxy, broken down, anæmic and thin. Great soreness and uneasiness felt in the bone and periosteum.

Mind extremely anxious and full of fears. The patient wants to be busy with work in order to drive off the anxiety, but occupation makes all the more anxious. The patient walks and walks for relief, but walking rather aggravates the anxiety. The *only* relief he can obtain is from *lying,—*the patient lies down and he is relieved all round,—this is quite peculiar. The patient gets a constant flushing in the head, as in *Lachesis, Sulphur* and a few others.

Just remember,—the weakest spot is the throat, and recurrence of symptoms there should direct your attention to other symptoms to see if the case fits in with this remedy.

* Suppressive treatments during the laryngeal stage must, and so often, lead to lung-phthisis.

**Medorrhinum**,—This is not a remedy for typical Tuberculosis, but on account of the Sycotic miasm, it may bring in the dry type of Tuberculosis, viz, *Consumption,* which is a continued wasting away of all the tissues of the system. Though Sycotic, it is a wonderful fact to be specially remembered that the Medorrhinum patient gets greatly *ameliorated* at and near the seashore.

The consumptive nature is generally developed in the children of Sycotic parents who acquired the *Sycotic* form of Gonorrhœa. and had suppressive treatment. Puny, sickly and of stunted growth from the very childhood, these children are found not to thrive during their youthful period, and rather to contract consumptive nature. The totality of symptoms of the remedy, and specially the said inheritance must be had.

**Millefolium**,—It is a *hæmorrhagic* remedy of great importance, so that the flow of blood from any part or organ of the human system, is easily controlled by this remedy, irrespective of any *individual* symptom. *Bright red* blood from lungs, nose, rectum, stomach or gum. It is remarkable that no special characteristic is found for its selection, save and except the flow of bright red blood from any of the orifices.

**Nitric ac**,—Always expect Syphilitic or Mercurial inheritance in Nitric acid cases of Tuberculosis. It is generally indicated in the *active* stage of Tuberculosis when hæmoptysis and profuse night-sweat are the prominent symptoms of the case. Fever *without thirst* is characteristic. Extremely chilly patient, highly irritable, and with an extreme pungency in the urine. Ulcerative-virtue of this remedy is remarkable and when this remedy is indicated by virtue of other symptoms, ulcerations in the lung tissue should be expected or apprehended. Palpitation on the slightest excitement or irritation. Though there is the characteristic winter aggravation and extreme chilliness in the patient, yet

its cough is badly aggravated in the warm room and in close atmosphere, the coughing is also aggravated during the night and on lying. *Loose* cough during the day with rattling mucus in the chest, but nothing comes up,—and it is *dry* during the night. Nitric acid patients are rather diarrhœic than constipative. Stitching pains are characteristic.

There are two chief complementaries of Nitric ac. viz, *Calc. carb* and *Arsenicum album.* The former is indicated generally during the curative stage and *Ars.* in both. *Ars.* can bring about euthanasia in incurable cases.

Nitric acid cases of Tuberculosis are mostly manufactured by virtue of the horribly wrong method of anal operation in cases of fistula. Patients are persuaded to the operation on account of the extremely sore, painful condition of the anus. As soon as the fistula is healed up by operation or external applications, chest symptoms develop with tubercular symptoms and of tubercular nature. I myself have seen it in many cases. (Vide also Dr. Kent's note on *Silicea,* in his Lectures on Mat. Med.)

Extremely susceptible to cold and coryza, specially in winter. Systems surcharged with Mercury or Syphilitic taints are fit subjects of this remedy. Fissures and ulcerations with stitching pains are its features. Always freezing and taking cold, though full of sweat. Generally upset by jar or noise, though most comfortable when riding in a carriage.

During the *active* stage, Nitric acid cases are generally not hopeful.

**Phosphorus**,—It is a *typical* tubercular remedy, Patients of extremely feeble and delicate constitution, sickly to the extreme, anæmic and emaciated, from the very boyhood, have in them the foundation of consumption goodly laid. Bleeding on a small prick is found to be rather bubbling forth, and hæmorrhage from small wounds, as well as from the various orifices, are the characteristic features of the remedy. Extremely *apprehensive,* and *sensitive* to external impressions, like touch, noise, odour, thunderstorms, etc.

Intestines, lungs, bones, as well as the brain may be the seat of tubercular developments in this remedy. Frequent Pneumonia is the premonitory condition before the development of lung-phthisis, and frequent acute diarrhœa predisposes the patient to the abdominal T.B. Be that so, in all Phosphorus cases, the symptom-totality peculiar to Phosphorus *must be* present, a seeming likeness made up of the *resulting* conditions is rather misleading. The true and faithful totality of Phosphorus symptoms consists of—a desire for *ice-cold* water and *ice-cold* drinks, a strong desire to lie to *the right,* and inability to lie to any other side, almost constant orgasm so that the head is wanted to be kept cool, and exposed to cold open air, a feeling of goneness in the stomach, chest and brain, burning and restlessness, etc. etc. The Phos patient desires to be rubbed or mesmerised. Atony or weakness is a specialty of this remedy.

**Phos ac**,—is not a tubercular remedy *per se*, but it can lead to it, in case any of the manifestations is *suppressed.* The leading condition is extreme debility, first of mind, and then of body (just opposite,—*Muriatic acid*). The tendency of this remedy is that its patient is *prone to lose,* due to the Psoric taint underlying within, the vital fluids, first *voluntarily,* but at last *involuntarily* or automatically. The young men growing too fast during the youthful period of their life, may, many of them, be the fit subjects of this remedy. They are prone to commit sexual excesses and the secret vice of masturbation. Then again, over-study or prolonged worry or cares in business, grief, sorrow, disappointed love, etc., may also produce Phos. ac patients. They find that the vital fluids are involuntarily ejected, due to the relaxed condition of their genitals. Extreme nervous debility is the permanent feature, unless cured early.

In case the debility continues, either brought about by the above causes, or as a *sequelæ* of Typhoid fever or some other debilitating circumstances, the tubercular diathesis may be produced in case any disease manifestation is *suppressed.* Suppose, its diarrhœa is wanted to be suppressed or its brain weakness is averted by some suppressive drugs, the chance is that lung-phthisis may come in. Women who suffer from profuse leucorrœa or have lots of issues or twin children to nurse, may have tubercular tendency or its active stage developed in their lungs. The acid has also a tendency to

hæmoptysis. Night-sweats come in order to accelerate destruction, as a complication of low types of fever. *Debility* and *prostration* are the keynote and complete *indifference* is the mental feature. Detailed conditions and symptoms are to be obtained from the Materia Medica.

Diabetes is another tubercular manifestation in this remedy, and may appear with or without sugar.

**Psorinum**,—Though this remedy is not typically tubercular, yet it can avert the active stage, if it can be timely used. Where skin eruptions have been *suppressed* this remedy is valuable, (if, of course, the symptoms correspond) in simplifying the case and curing it, with the help of reappearance of the skin-disease. Slow fever, irregular fever, nightly fever, etc., during the tubercular diathesis can be very nicely met by this remedy, where there is a history of suppression of skin diseases, or where the symptom-totality may call for the remedy.

Mind intensely *sad, despondent and hopeless* of recovery. *Offensiveness* of the discharges. Debility without any apparent cause. Bath aggravates,—the patient being chilly. The smallest exertion brings out copious sweat, specially in the head and the forehead. Always shivering and trembling. Profuse sweat in fevers with a good deal of amelioration from the sweat. Heavy and debilitating night-sweat during the active stage of Tuberculosis. Dry cough,—cough distressing and debilitating. Sweat in the palms of hands and the soles of feet.

Sometimes there is burning in the extremities, specially of the soles, just like *Sulphur.*

**Pyrogen**,—It is an excellent remedy, rather the only remedy, in averting the Tubercular developments coming on in the females on account of the uterine disorders having their start from some delivery. A few other remedies are there, viz., *Carbo animalis, Hydrastis, Kreosote,* etc. but none is there to take the place of this remedy. Moreover, in these cases, Pyrogen is found to be indicated in many cases.

A peculiar characteristic of Pyrogen fever is its abnormally rapid pulse which is *out of all proportion* to the temperature of the patient. *Rhus tox*-like bone-pains and restlessness, ameliorated by movements, heat, hot bath, drinking hot drinks and very tightly binding the affected parts. *Psorin* like offensive discharges, specially, the lochial flow is abnormally fetid. Chilly and restless. Lungs sore and painful, and this condition is highly aggravated by coughing, which is generally dry and aggravated at night. Positive aggravation from lying to the left. It is quite peculiar that the patient is always *painfully conscious* of the heart. Palpitation increased by the slightest movement Tongue abnormally red, thin, with white fur at the base. Cannot lie more than a few minutes in one position, because the bed feels too hard,

Sometimes, malarial fever culminates in Pyrogen condition and leads the female patient to consumption.

Septicemia also may end in active Tuberculosis, if the symptoms, as above, correspond. Emaciation, dry cough, restlessness, etc. come in by and by, with the slow evening fever that continues.

**Psorin**,—Chilly and offensive like Pyrogen,—But *Psorin* is ameliorated from lying, Pyro is aggravated thereby.

**Rhus tox**,—Chilly and restless and has also bone-pains just like Pyrogen, but *Rhus* has the worst aggravation during the first movements whereas Pyro is just opposite, viz, first movements give the greatest amelioration. Moreover, Rhus has no offensive discharges.

**Sanguinaria**,—It is not a deep-acting remedy, yet when its symptoms are not truly cured by other remedies, but simply suppressed for the time being, it is just possible that the disease force commences to work in deeper tissues and Tuberculosis may come in. I have myself seen in various cases of its sick headache, which comes every seventh day or every two weeks, being suppressed by anodyne mixtures or injections. These patients lived quite well for some time, say, two or three or four months, and then found to their surprise that they had suddenly and curiously enough been *susceptible* to cold, coryza and cough. One patient, I know, had to suffer off and on from brain disorders, after the suppression of his periodical headache, and I could not cure him with all my efforts by the ordinary remedies prescribed for his case, because I did not know

of the history of suppression, as he himself also could not find the true cause of his troubles nor could his relations. At last, on the basis of "too much burning of the palms and soles, specially in bed," I prescribed *Sulph* 10m. and the cat was out of the bag, and the head-pains returned with a full and permanent relief of his brain symptoms. You need not wonder, because the brain disorders are as tubercular as the lung symptoms are, it is simply a change of spots for manifestation. You should always remember that the brain symptoms and the lung-symptoms are equally tubercular. I have found in many cases this sort of change of basis.

Sanguinaria has a type of headache which commences in the morning, slowly increases and decreases with the rise and fall of the Sun, and subsides with his setting in. You must *never think of suppressing* this type of headache. It is called in Ayurveda as *Suryja-varta* and is *positively* tubercular.

But for all this, Sanguinaria has no depth. The symptoms during the *active* stage, are most offensive expectoration, (very much offensive even to the patient himself), circumscribed redness of the cheeks and burning heat there, burning of the palms and soles, and intense soreness and fullness, characteristically in the right chest (higher up than in *Kali carb*) and extending towards the right shoulder, so that the patient cannot raise the right hand. Flushing, i.e., frequent hot feeling towards the head and checks is pronounced.

As a word of caution, I want to tell you that Sanguinaria is never *curative* except in the diathesis or incipient stage, but only a palliative. Moreover, you may be tempted to give *Sulph,* which more often harms the patient irretrievably. *Sulph* is never to be thought of in the *active* stage, even though it may *seem* indicated. A solitary dose of *Sulph* high does much good in the *diathesis* stage, if symptoms are clear for it. I have seen *Tuber. bov* giving excellent help in any of the stages, even though only a *partial* picture is obtained for the remedy.

During the *incipient* stage, *Sanguinaria* does a nice work of palliation, and sometimes may cure, but in every case, you should not leave the patient without giving a finishing touch, with some deeper remedy, like *Lyco., Sulph,* more often, *Tuber. bov.* Always think and observe carefully before you give *Sulph.*

**Sepia**,—Tubercular cases of this remedy are produced among the females who have a history of very scanty menstruation all along and a long array of symptoms in the uterine sphere. Extreme goneness in the stomach and in the uterus, hopeless constipation, aversion to coition and extreme dejection, etc. are the features. Prolapsus of the uterus is a strong characteristic of these females In these rundown constitutions, dry coryza. comes in, specially of the left nostril and large offensive plugs are formed. Bloody crusts are blown out and a very troublesome form of nasal catarrh sets in gradually.

Generally Tubercular developments start from this condition, specially where non-homœopathic treatment is followed.

Dry cough, offensive expectoration, specially, in the evening and on lying down at night, attended with extreme constipation and sadness, ameliorated by cold and other discharges, as well as in open air and violent exercise; oppression of the chest morning and evening.

Another cause, which I myself have seen, of Sepia Tuberculosis, is the *suppression* of Malarial intermittent fevers in the *Natrum mur* and Sepia constitutions, either male or female. The *Natrum* intermittent fevers, though of clear symptoms, are wanted to be checked with quinine and turned disorderly and confused; by and by, a low fever starts with other symptoms of Consumption. Some cases may be reduced into Sepia condition, but the other cases run in a Tubercular process.

Always look for Sepia mind, Sepia constitution, inveterate constipation, evening rise of fever, a dry hacking cough, a painful sense of goneness in the stomach and lower down. Sepia females, you know, are thinly made, and of rather a hysterical diathesis, sometimes very much jolly and merry but in the very next moment sad and weeping. The main characteristic

of her mental symptoms is the extreme indifference and lovelessness to those whom she should love the most. Sepia is extremely irritable and obstinate.

Always remember that Sepia cases are slow, very slow and characteristically slow. Never hurry up or expect immediate impression after the administration of your remedy.

The third cause for the oncoming of Sepia Tuberculosis is the *suppression* of skin symptoms, which are herpetic, with itching and burning. They are not easily suppressed but nowadays by virtue of various injections they can be, and a dry form of Tuberculosis, which is technically called Consumption, is found to set in. The herpetic spots are characteristically dry. From my own experience, I have seen these cases to be nicely met by Sepia complemented by *Bacillinum.*

**Silicea**,—This remedy is a perfect picture of Tuberculosis and Tubercular disposition. It will appear from the study of this remedy, that it has been Nature's intention to correct the human system vitiated with inherited tubercular predisposition or diathesis. The very early life, even in the dentition times, the child gives indication of the above condition within its system, so that the following symptoms are found to manifest.

(1) Pale face, fine dry skin, intensely weak constitution, extreme debility so that the child always wants to keep lying down.

(2) Nutrition sadly deficient, not on account of anything wrong in the food-stuffs themselves, but *from the want of the child's power of assimilation.* Hence always exhausted and tired at the very early age, when there should be the highest amount of spirit and cheerfulness.

(3) Extremely rickety condition with a large head and open fontanelles and sutures; head always full of sweat and must have to be kept warm; weak ankles and so very slow in learning to walk. Want of vital heat is very much marked.

(4) *Mentally,—*extremely restless, fidgety, starting at the least noise, very much headstrong and obstinate yet with anxious look and timidity.

(5) Susceptible to cold and coryza on the slightest cold exposure, specially of the feet, much sweat, and offensive too, of hands, toes feet and axillae.

In case the system is not cured during early years, there may appear many disease symptoms, which, if suppressed, may lead to Tubercular developments. One of them is the periodical headache; another is glandular swellings; the third is its tendency to suppuration and ulceration with sinus; the fourth is *fistulæ in ano;* which, if operated, or healed with the help of any external means, may bring in T.B. symptoms.

*It is very much important to know that Silicea should never be given during the active stage of Phthisis, because if so given, it may *accelerate* the process, far from curing the patient. The remedy should always be taken help of during the *diathesis* stage in order to abort the tendency and cure the susceptible individual.

**Spongia**,—is a glandular remedy, slowly leading to Tuberculosis, when its symptoms are *suppressed.* The thyroid glands swell up to the chin, with suffocation at night. Goitre forms. The peculiar characteristic is its *dryness* of the mucous membranes of the air passages, viz, throat, larynx, trachea and bronchi,—as dry as a board or as a horn, Its cough is croupy,—like a saw driven through a board, dry and rough, aggravated by sweets, cold drinks, lying with head low, cold winds and by reading or speaking or using the voice in any way, and ameliorated by eating or drinking *warm* things. Everything is perfectly dry, no mucous rales are found or heard. During the cough, anxiety aggravated during inspiration and towards midnight. Worse after sleep as well, like *Lachesis.*

Laryngeal symptoms with hoarseness and dyspnœa, and other difficulties of this remedy are particularly relieved by *warm* drinks. Dryness of the parts is also very much important.

One thing to be specially noted is that there is *a tendency* of the tubercular patients to get hoarseness and other symptoms in their larynx. You should compare

*Arg. meta, Iodine, Bromine,* and other Tubercular remedies having a similar tendency.

**Stannum**,—is a tubercular remedy frequently indicated. Intense weakness a debility, specially manifested in the chest, where *a sense of goneness* is most prominent,—so weak that the patient is unable to talk. The weakness is most felt, even to fainting, when going downstairs, no difficultly in going up (*Sulph, Calc. carb, Carbo veg, Phos, etc.—just opposite* ).

Mentally,—extremely sad, as if weeping all the time.

Expectoration,—loose; salty, *sweetish*; thick; green; sometimes yellow; profuse; with extreme weakness felt in the chest or the whole sternum region. Aggravation from lying to the right (*opposite*—Phos), and singing, laughing or talking.

Patient is full of debilitating sweats, morning and night.

Stannum is an important remedy in this sphere. The patient is characteristically weak and worn out and has long been suffering from neuralgic pains which have the speciality of increasing gradually and declining gradually as well (opposite *Bell*). These pains are much weakening and in case they are *suppressed,* on come the tubercular developments, specially in the lungs,—the chest and the lungs being the weakest spots in his system.

During the Tubercular stage, the patient is extremely chilly.

**Sulphur**,—This remedy either can do a tremendous good or a tremendous harm. First, how and where it can do the highest benefit,—must be fairly understood, so that the proper sphere for its use may be truly ascertained. Then how it can do harm,—may be given.

Suppose, a *psoric* individual gets frequent cold and coryza, and it continues, i.e, the susceptibility is inlaid there, owing to deep-seated *tubercular* miasm in him, to be affected with cold, as soon as the man is exposed to cold winds or cold bath. Or, suppose, he gets an attack of Bronchitis or Pneumonia or Broncho-Pnenmonia, and a trail of any of them continues on and on, either in the form of a fixed catarrh or a frequent renewal of the disease-symptom, *and the individual has the Sulphur totality of symptoms,—in* that case, Sulphur can do the highest amount of good in completely .changing the tubercular diathesis into a healthy condition and no active stage can on-come, because the process is *cut short* then and there. Sulphur can stop the renewal of the attacks as above stated or can cut short tubercular process expressed in the susceptibility to frequent cold and coryza.

Here, you should carefully remember the Sulphur group of symptoms, so that you can readily use the remedy,

(1) Most important symptom is the *orgasm* or *hot* flushes of blood upwards, ending in profuse sweats in the head or forehead, which are debilitating.

(2) Burning in the palms and soles, specially daring night, so that they must be kept in cool places, even in the depth of winter. The patient may have cold extremities during the day, but there must be burning in those parts during night in bed.

(3) Nightly suffocation—wanting the doors and windows open.

(4) Morning diarrhœa—driving out of bed stool.

(5) Patient is *dirty,*—does not care very much to be and keep clean. He is filthy throughout, even smells his own genitals and eats his own excrements. He gets offensive sweats in his arm-pits and has an offensive odour from his body.

(6) Does not want to bathe, and bath aggravates, though he wants to expose himself to currents of open air, if it is not much cold.

(7) Intense goneness or emptiness in the stomach at 11 A.M., so that he must eat something and cannot wait for the dinner.

(8) Prone to skin disease. There may be a history of suppression (*Psorin.*) There are also a few others, but the above few points are most important, and where a majority of them is present you will always expect excellent results.

Then, you must have to understand and remember the stage or condition, where, Sulphur, if applied,

may have the chance of doing a tremendous injury. It is really dangerous to give, especially in potencies above 30th or 200th, in the *active* stage of lung-phthisis when structural changes have already commenced and tissue destruction is in sight. At this stage, some of the Sulphur totality may be present, but it is better not to be deluded by them. It is far better to give *Tuber. bov* instead, and better results are generally obtained thereby. Never try to stop the morning diarrhœa of the Phthisis patients with Sulphur, because the diarrhœa is rather a safety valve, and in case it is stopped, the suppurative process will aggravate and the deathward course will only be accelerated.

Another use of Sulphur on the "no symptom basis" is not to be encouraged.

**Syphilinum**,—Though paternal or ancestral Syphilis is in most cases the cause of Tuberculosis in the son or the descendants, yet acquired Syphilis can in rare cases, bring in Tuberculosis in the true sense of the term. However, it can bring a likeness of the dire disease by producing asthma and cough, both of which are aggravated at night. You know Syphilis has always the night-aggravation in almost all its disease-symptoms.

Soft palate is entirely destroyed; and so can be cured, by Syphilinum, if the prominent Syphilitic symptoms and conditions are present, viz., offensive and viscid discharges are there from the palate, and specially, the patient cannot rest in bed, but is compelled

to walk the floor or the open *verandah* for the whole night. Tongue and mouth cavity, full of ulcerations and offensive discharges. Copious sticky saliva from the tongue. *Warmth of the bed aggravates.* The patient himself is full of sweat, specially during night.

Asthmatic fits and cough,—ameliorated by lying to the left, and frequently aggravated by lying to the right and keeping in bed. *Warm* damp weather aggravates. Horrible *insomnia* is a special feature of the remedy in these conditions.

These are only *a likeness* of Tuberculosis, but not. really so. *Acquired* Syphilis can mostly bring a likeness, but Syphilis coming down through heredity is capable enough to produce a true Tuberculosis.

**Thuja**,—You may wonder how a deep anti-sycotic remedy like Thuja can bring in Tubercular affections. Yes, it can,—in case its developments are *suppressed.* It has the peculiar ability to throw out spongy fig-warts upon the skin, specially upon the genitals and on the face and if these are *cut away*, the tendency is to affect the mind and bring in Insanity,—the Tuberculosis of the brain. There are various neuralgic pains of this remedy which also should not be *suppressed.*

You know *Sepia* and Thuja are capable enough to affect the ovaries of the females, and in case these ovarian symptoms are not properly *cured,* the chance is that mind is affected and an intense irritability, jealousy, quarrelsomeness, and a fixed idea

that somebody in the family is inimically set against her or that she is likely to be poisoned by her, etc., are the results. In some cases, mind is affected directly or through the heart.

Lung Tuberculosis is hardly ever seen in Thuja.

**Tuberculinum bovi and Bacil**,—These two remedies are almost the same, through from my individual experience, I have found that *Bacil.* suits those patients whose life-history reveals the ruthless suppression of ringworms and such skin diseases of obstinate type, and a Tubercular diathesis is known to have started since then. Moreover, the *Bovinum* form appears to have a deeper and more far-reaching action on the human system than the *Bacil.* form of the remedy. However, for myself, I generally use *Bovinum,* unless it fails or does not appear to act quite satisfactorily and the above history is obtained, when I use the *Bacil.* form.

As *Sulphur* is said to be the king of anti-psorics, so Tuberculinum stands supreme in the list of tubercular remedies, viz., *Calc. carb, Psorin, Iodine.* etc. It has a peculiar nature, which is generally called "Cosmopolitanism." A cosmopolitan is one who pertains to the whole world and is unable to confine himself to a particular place or a country. The cosmopolitanism, which is a characteristic of this remedy, means the constant *changefulness* of its symptoms, its desires, its nature, etc. The patient cannot be satisfied with a particular place, or a particular food, or anything, for a long

time,—he has a constant desire to change every thing regarding his own self. Even a particular type of dress cannot give him satisfaction for a long time,—and he must change. He may take a fancy to a particular place, for a change of climate, and he may be highly jubilant over it, yet after a few days, he thinks the place to be a nasty one and is anxious for a change to another place. Change, change, and change—this is the motto. Then, regarding his symptoms,—they are constantly on a change; first this organ, then that organ, then still another, and so on; or a particular disease of a particular organ appears every now and then, it seems to be removed once for all. But no, it reappears on the slightest excuse.

*The Tuberculinum.* Tuberculosis generally commences with the suppression of Intermittent fevers (so called Malarial fever) with heavy doses of quinine, or the quinine Injections. Those that are *prone or predisposed* to Tuberculosis are generally attacked with fevers of *Intermittent* type, and any suppression or unhomœopathic treatment only accelerates the T.B. symptoms to come in. Nowadays this is perhaps the main reason why so many are developing T.B. in an early life. You will oftentimes get a particular symptom in intermittent fevers, which clearly indicates this remedy and that is a *dry cough* during the *chilly* stage. Other symptoms of the remedy, of course, confirm its prescription.

It is also true that when all other apparently indicated remedies fail, specially in a suspected T.B. case, the remedy ought to be given a fair trial, and I know from my own experience that in all such cases, this remedy succeeds. Moreover, those who have or had T.B. or insanity, in their ancestors, or a Tertiary Syphilis in them or any of them, this is the proper remedy, for the purpose of immunizing them and their children from getting the dire disease. I should like to quote here the memorable lines of our illustrious Dr. Kent,—"If Tuberculinum bovinum be given in 10M, 50M, CM, and M.M. potencies, two doses of each potency at long intervals, all children and young people who have inherited tuberculosis may be immunized from their inheritance and their resiliency will be restored."

But you must have to look to one thing. Always see that the totality of symptoms of the remedy is there in your patient under treatment. Of course, patients are found in whom no symptoms of this remedy are there, yet it relieves to the greatest extent, nay, sometimes causes, if given as the last resort.

Extreme irritability of temper without any satisfaction is a typical condition of the patients of this remedy. It should be carefully borne in mind.

Frequent attacks of cold and coryza, or rather a stubborn susceptibility to it, is always tubercular, and is most often met by the remedy, Adenoids and swelling of maxillary glands unmistakably point to the tubercular diathesis, if not Tuberculosis.

It is verily true that Insanity is Tuberculosis of the brain, and heredity from insane parents is highly suspicious with regard to the tubercular diathesis in the children. Moreover, *tabes mesenterica,* infantile liver, marasmus of children, are early signs of Tuberculosis, and where symptoms agree, can be cured by it. Intense debility and prostration without cause with profuse sweating in bed, is always tubercular, and point to the remedy.

Other symptoms may be had from Materia Medica.

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There are various medicines in our Materia Medica which are often very useful in the various stages and conditions of Tuberculosis, in the way of mitigating the most painful symptoms which may be, for the time being, giving much trouble to the patients. I want to say something in a few words in this connection, by way of caution, both for the interests of my fellow practitioners as well as of the patients entrusted to the care.

It is always better, in those cases of Tuberculosis where the physician can entertain a fair hope of curing, not to interrupt the continued action of the deep-acting constitutional remedy carefully selected which may also be acting well. Occasion may arise when you may be tempted, upon the request of the patient, to remove a particular ailing symptom, and the most important point would be to decide here, whether you *should* give any other remedy for the purpose. If the particular ailing symptom is one of the previously *suppressed* symptoms

which has *reappeared* under the action of your remedy, the safest decision is,—"hands off". Under a careful prescription, the law is that no *new* symptom should appear. But in these days of suppression and various types of mal-practice, nothing can be said with precision. Now, suppose, you *are* to give a remedy other than what is acting, in the case, always give a *medium* potency of the new remedy, viz, 6th, 12th or of the highest 30th. The lowest potency that you can use, under this circumstance, is 6th. You may ask the reason why,. The reason is that potencies lower than 6th may have the effect of *suppressing* the ailing symptoms, and potencies higher than 30 may have the sure effect of interfering with the action of the high or highest potency of the deep constitutional remedy which you have already given and has been goodly acting. Because, *the golden rule* is *not to interfere* at all with the remedy acting in the deeper centre.

Now, where you are not very *sure* about the prognosis. or your previous remedy could not be properly selected under the circumstances of the case, and you do not also think that it has commenced its beneficent action,—there is no such hard and fast rule as above. Moreover, where you are *pretty sure* of the sad and undesirable end, you should always look to *euthanasia* or painless death, by giving remedies suited to the *changing* circumstances, with the only view of alleviating the troubles, pains or aches that may come in, from time to time.

It may be, in some cases under your treatment, as soon as, under the beneficent action of your remedy, some *suppressed* symptoms have *reappeared,* the family gets unreasonably alarmed, and without your knowledge, the patient is taken to the same redoubtable physician who had so skillfully suppressed them. The patient may then be brought to you and what they did is absolutely withheld from you. This type of case is very much irksome and unless a sincere promise is obtained not to do so in future, it is better to leave the case and ask the family for his treatment elsewhere.

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## ILLUSTRATIVE CASES

No. I

LYCOPODIUM AND IODINE

Sj. Gangadhar Sen, son of a pleader, brought up under a very rich or rather a lavish style, and being the only son, had always been made too much of in childhood and youth. Though his wedding was performed as early as in the 18th year, yet he turned a profligate, and sought enjoyment in prostitutes' places, and contracted a bad type of Syphilis. His father also had Syphilis before his birth and so the hereditary taint mixed up with the acquired Syphilis. Gangadhar one day made a clean breast of the affair before his mother who also most anxiously related the matter to her husband. The Civil Surgeon of the place was consulted, who advised separation from the wife, and for the purpose of treatment gave a few Injections of Salverson and that was all. The family and the physician were pacified, under the impression that Gangadhar was all right, and in fact, there was nothing to complain of. A few months, rather a year, rolled on, and once on a day, just after a foot-ball match, in which Gangadhar was an active player, a fit of dry coughing appeared and at last a bloody vomit

ensued. The same Civil Surgeon was requisitioned and the blood vomit was brought under control, for the time, with the help of three Injections,—the name of the Injections was not known. All went on well except a bit of weakness which was also recouped by good and nourishing diets. Three months after, the patient got another attack of hæmoptysis and the same method of treatment was adopted.

In September, 1923, Gangadhar felt a daily slow fever generally in the evening, rising up to 100° degrees at the utmost, with a general malaise and a feeling of exhaustion,—this time, i.e., about 3 months after the second blood vomit, it was found that blood commenced to come up with sputum and not as a vomit. The quantity was very small at a time, but it was persistent. The same physician was again consulted and he asked the party to keep the patient under *Ayurvedic* treatment, and so the patient was kept under a reputed *Kaviraj* of Raniganj, for 5 months or so, and though he was greatly improved in some other respects, yet no relief, with regard to the main complaint was obtained. The slow fever continued, and emaciation notwithstanding a good appetite appeared prominently. Under this circumstance, the patient was advised a change of climate to Puri, so that he might recoup his health by the virtue of the sea-air there. He was apparently better there, the fever-heat also came down, but there was no real improvement, though he was kept there for more than six months at a stretch. The family then thought of

Homœopathic treatment. I just forget to mention that the *Ayurvedic* treatment was continued all along when the patient was at Puri.

Now when the family fixed upon Homœopathic treatment, he was brought down to Calcutta. and was placed under the treatment of Dr. Younan, from the end of 1924 to the middle of 1925. Most of the serious symptoms far abated under the able physician, though *the tubercular process* went on as before. It was improvement, no doubt, and I do not know whether the party should have continued that treatment under him for some time more. In any case, and specially because the renowned Doctor had been to Darjeeling for some time, the patient was taken away from Calcutta and the party having been advised to keep him under my treatment, he was taken to Dhanbad where I had been practising both Law and Medicine (Homœopathic). I advised the party to fix up a lodging there, so that the treatment might be pushed carefully in such a serious case. The record was made in July, 1925, as given in the following. I give the statement in the patient's own words.

"Doctor, I am slowly proceeding towards death, and I feel it; I am daily emaciating, even with best of my appetite. Weakness and exhaustion, with restlessness mental and physical. Still, I can feel that so long I have been under Homœopathic treatment, I am better than formerly but I have no escape, because the onward course could not be arrested."

At this stage, I asked the patient to describe the pains, aches, difficulties, inconveniences and discomforts he was suffering from, and I said, by way of consolation that I must take down everything that be would wish to state regarding his ailment; then the patient commenced to state as in the following, "My first point is the daily fever coming towards every evening, say, between 5 and 7 p.m, which gives me the greatest trouble. It comes with a fullness of the stomach and abdomen, a sense of fullness which I can hardly describe. Do you know what do I do, in order to obtain relief? I commence and continue to walk over our extensive verandah, and, after a short time, winds commence to pass up and down, specially by way of eructations, and I feel a relief in proportion. A slight chill, then a slight heat, with a small sweat, specially towards my forehead,—these are the three stages I have carefully marked from the very start of my disease up till now. There is hardly any thirst during the whole period of fever, which goes off at about 7 or 7-30 p.m. Though the fever is very slight, yet I feel that I have just suffered from a high fever, so much weakness I feel. I have generally good sleep. In the morning, I feel as if I have been fasting for a long time, and I feel an all-gone or vacant sensation, directly proportional to the fullness in the previous evening. I feel very much *dry*. I must have to eat some food and a cup of tea, as hot as my lips and mouth can bear, after which I feel a good deal refreshed. The lowest temperature, 97.3° to 98°, is found in the morning".

"I find that every now and then I must eat, or else I feel a griping sensation in the abdomen and stomach, but one peculiar thing I have marked is this that I cannot eat much at a time, and in case I eat, a good deal of trouble is experienced in the form of fullness, acid eructations, orgasms towards the upper part of my body, a restlessness, etc, so that I must eat small at a time, but the thing is *I must eat very often.* At about 11 or 12 o'clock in the noon, I feel a whirling in the brain, goneness in the stomach and abdomen, which are all relieved on taking my mid-day meal. After the meal, I must take to bed, for I feel very much sleepy. From 3 or 4 p.m., I feel out-of-sorts, though there is no rise of temperature. Palpitation and fullness are the things which appear specially between noon and 3 or 4 p.m. The rest I have given you already."

"I love daily bath except in winter when I like tepid water. It is sure that I am chilly though I like open air, and fanning during the fullness and flushing. I must lie to the right, and I do not know why I cannot lie to the left. Sweets I like most, then sour; I have no special thirst for cold water. I am averse to cold drinks, and I like *warm or hot* drinks which relieve my complaints as well. I cannot stand summer, nor can I stand warm room nor covering in the head. I want alone though a congenial company I like. Any way I avoid crowds. I am rather constipated.

"One word I want to add regarding the dry coughing I have been suffering from. I suffer most because it is

dry. After coughing and coughing, much coughing, when it becomes loose, I feel greatly relieved. The coughing has also a time aggravation,—it aggravates positively in the afternoon and on lying to the left."

Now, upon a fair study of all the symptoms of suffering and also from the history of the case, I fixed upon *Lycopodium* and I administered it in 1000th potency. After 3 weeks, a decided improvement was felt by the patient; and he confessed in a long letter that he was in a fair way to cure. No remedy was given,—19-8-25.

Then on the 11th September, I myself saw the patient and decided to repeat the remedy. After a good examination and cross-examination, the same remedy was still decided upon and was administered in the same potency.

On the 4th October, I had to repeat the remedy in 10M. potency, as the process of cure did not seem to continue as formerly. The thread of action seemed to be taken up, and the patient was fairly all right up to the end of December, after which again a break-down appeared. By this time, the slow fever was no more—there was not a single cough. But the wasting continued and the malaise with exhaustion did not cease. I re-examined the case and thought of some complementary remedy and fixed up *Iodine.* On the 25th December, I gave a dose of *Iodine* 1000th in three graduated potencies. The improvement was just magical, so to say.

I had the opportunity to see the patient once again on the 15th of March, and really could not at once recognise the patient. The emaciation was almost no more. Another dose of *Iodine* l0M. was given as a finishing stroke and that was all.

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## No. II

## PYROGEN—
## STANNUM—TUBERCULINUM BOV.

Sreemati Sasimukhi Dasi, wife of a Deputy Magistrate of Manbhum, came under my treatment in 1921, when I was at Dhanbad, for the "dire Tuberculosis" she was said to have been suffering from. Her age was 22 or 23 at the time. She had been under the treatment of many eminent Allopaths of Calcutta for the last 2 years and a half, since a delivery (the first delivery). The details of her case are given below. The history of the case is that after the most painful delivery, she suffered from a bad type of peritonitis attended with fever, and Allopathic treatment consisting of external and internal medication as well as a few Injections set her right for the time. But as ill luck would have it, a month or so afterwards, her brains got disordered and she commenced to talk nonsense. She used to laugh and dance often, sometimes she used to weep. Now, two or three months after the insane symptoms developed, she began to recognise nobody, even the dearest of relations,—her husband, who had all along been so dear to her, she could not recognise. She became more and more silent all the while. Thus a perfect case of insanity

developed, and the husband kept her in the meantime, under the treatment of a good Kaviraj of Katrasgarh, but apparently to no effect. She was then brought to Calcutta and kept under the consulted treatment of the three best of physicians of the Old School, who lavishly gave her Injections, only to make the case worse and worse. One of those worthy physicians declared very frankly that Allopathic treatment would do no good and advised the husband to commence either Kaviraji or the true type of Homœopathic treatment. In August, 1919. she again had Kaviraji treatment for a few months but no better result followed. By and by, she began to emaciate and all her dealings and behaviours and movements were just like those of an automaton,—"really dead, though alive," which was the verdict of a physician at Calcutta.

Now, in Nov. 1919, the husband was advised to take to Homœopathy by one of his office friends and my name was suggested. The gentleman wished that if Homœopathy was to be tried, it would be more advisable to keep her under a good Homœopath at Calcutta, specially because she had to be at Calcutta for sometime more, on account of some private matters in the family. The whole of the year 1920, she had Homœopathie, which was really the Allo-Homœo, treatment but to no benefit. Moreover, the case got more complicated and her emaciation was rather alarming. Now on 17th, January, 1921, she was brought down to Dhanbad and placed under

my treatment. I could make the records, long after, as is usual in insanity cases.

It was most difficult to make any Case-records, specially in these cases of deep complicacy. The difficulty is not only natural but more due to the suppressive methods of treatment. All insanity cases are confusing, and this case was specially so. I may be accused of the routine-like treatment that I had to adopt in the beginning, but there was no way out. The patient herself was altogether dead silent, lying quiet on bed, would neither speak a word nor stir a little. The worthy husband, having had not the least faith in Homœopathy took to the treatment under a Homœopath, as a matter of rather compulsion, though partially impressed upon and convinced by my arguments on curative principle. However, I could not promise cure, though gave him every hope. He was further moved, on account, of my thorough *questionnaire*, and deep query, as well as the fatherly care I was going to take with regard to his wife's case. During the conversation, I got the most valuable information that my patient had hardly any menstrual discharge during this long period, between her delivery up till then. I knew also that all these disease-symptoms commenced from the delivery, which had been getting more and more complicated all the time, by virtue (of the) so-called treatments followed. Through His mercy, my attention was directed to *Pyrogen,* and I intended to administer

ill, specially because no totality of prescriptive symptoms could be had. "If through His mercy, the case gets simplified, and the consciousness of my patient comes back, I would be able to make a true record and proceed in the line",—so I thought within myself. Accordingly, on the 22nd January, 1921, three doses of *Pyrogen* lM, were given to my patient, in three consecutive mornings.

As early as 2nd February, a profuse blood, exactly of tarry nature, commenced to flow, which continued for 6 days together, off and on. I learnt that she commenced to take care of the flow so that it might not soil the cloth or her bedding,—a thing that was very hopeful for the worthy husband. She began to stir and move here and there. On the 13th February, she enquired of the cook as to why so very few and unseemly curries were prepared for her husband and not better type of dishes, as formerly. The husband really shed tears, when he told of it, to feel that the good wife was again coming to a condition when she would be able to see to his necessities and comforts. On the 24th February, he requested me to re-examine his wife for the second time, and I simply marked a sort of brightness, a sort of vivacity in her general look and appearance. We delighted to see her a bit improved. No further dose was given.

At this stage, the good husband enquired as to what to be expected in future, so that he and the members, extremely anxious and perturbed as they all were, might be fully assured of her cure. I at first fully *assured* him

of her eventual cure, though it would take time to obtain it. I replied to his query in the following way. "If a perfect and natural cure is to be ahead, you should expect re-setting-in of her monthly flow with more or less discharges. It should regularly appear every month or every 28 days, by and by. Then, the most important thing is that the puerperal fever which was suppressed by force of Injections, *must* re-appear after which her brains would be fully cleared up". In course of those assuring conversations, I tried to convince him of the true *principle* of cure, which the gentleman, highly educated and intelligent as he was, relished so much that he promised to study the Science and Art of Healing, under my guidance,

However, on the 13th of the March, my patient had a hard chill followed by high heat. The fever continued for a week or so, and then went off. Then again, from the end of March, the fever appeared of a slow and low type, every afternoon to evening, with a small rise of 99.5° to 100° at the utmost. During the continuance of this fever, her brain became quite all right, perfectly natural and normal. The husband said—"Her previous picture has come back." Now was time for making the records. I give below the symptoms and conditions in her own words, as far as is possible.

"I was never a sickly girl before my marriage, nor did I suffer from any type of grave illness any time before delivery. Just after a few days of my delivery, I had severe pains in my abdomen, so much so that I lost my senses with high fever. Allopathic

Doctors were engaged,—thus far I remember clearly; after that I felt my brain was getting hazy and confused. I feel that I have got a new life under your auspices. If I am now cured of this slow fever, I shall be all right.

"I cannot rest at a particular position for any length of time, because I have the constant inclination to move. Though I am rather chilly, yet I do not desire warmth or closed rooms but want bath, though bath aggravates my condition. I remember to have used lots of Cod Liver oil in my girlhood, under the advice of my father's attending physician, with the view of avoiding the susceptibility to cold and coryza that I used to have, and I got a bit of improvement at the time. But my susceptibility was all the same afterwards, The greatest discomfort I feel in my chest, which seems all-gone, absolutely vacant, even I feel disinclined to speak,—1 feel so weak."

On cross-examination—"I am fond of sweets. I lie to the left but never to the right. Hoarseness is my chronic symptom but it does not give me any pain or inconvenience. I am extremely weak. Leucorrhœa is of course there, but the menses which were so long suppressed are now profuse. The mucus from the throat and lungs is rather salty."

With all the above symptoms .and conditions, I had to give her *Stannum* from 200th to 10 M.—in course of six months. She steadily improved. The fever that was of a low type, disappeared under the action of 200th. The patient was all right in every respect, except that

the susceptibility to cold and the emaciation were not fully gone. On the 5th Oct, I had to give a dose of *Tuberculinum bov.,* in 1000th potency, and that was all.

*You will just understand what a tremendous confusion and complicacy may be brought on your patient by virtue of *suppressive* methods of treatment.

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No. III

## KALI CARB AND TUBERCULINUM BOVINUM

Sj. Peary Charan Das, aged 24 or 25 years, a Colliery Proprietor of Jharia Coal fields, had an attack of cough and cold with a low type of daily rise in the evening and after having tried a long course of Allopathic treatment under many physicians of name and fame in the locality, I mean, Katrasgarh, Jharia, and Dhanbad, came under my treatment in 1925. Almost all the physicians had declared it to have been a case of "Tuberculosis," and one of them, i.e. the last one consulted, gave a clear opinion that the patient reached a stage which was beyond cure. However, when the patient came up to me, I thought that I must examine his chest, first of all, and then make a record of the case. Accordingly, I thoroughly examined the patient to see that his right side was principally affected, but no cavity was as yet formed there, only the part was highly sensitive and full of mucus. There were rales almost all over the chest, both sides, but no sensitiveness except in the right front. I then thought of making a complete record of the case.

A relation of the patient accompanied him, and gave his previous history which was really alarming. The

sum and substance of the story was that the gentleman, very rich and uneducated as he was without character, so much so, that his devoted wife and his old mother, notwithstanding their godly nature and intense solicitude for his cure, were driven off from the colliery house and sent home, simply because they would not allow him to indulge in his sinful ways. He liked to remain rather alone during the day time, but surrounded by so many low class females during the night. I do not want to give you here all the details of his nature and thus pollute my pen, but this much is sufficient for you to know that there was no *will to cure* in him. He was rather of an undaunted character, if character it may be called, being absolutely dedicated to sex-enjoyment. Had the gentleman given this information before my taking up this case, I would have declined his treatment, but after I did all that was necessary, he made a clean breast of the affair and pictured no other alternative than to proceed. I took down his case. The following were his symptoms and conditions.

"I was addicted and habituated to self-abuse from the 12th year of my life and I took a good deal of delight in it. I had a group of friends who were and still are of low habits. From the 18th or 12th year, when I was in my colliery, I took to sexual indulgence with the coolie-- girls of this locality, who were very cheap. I found that I got no enjoyment in company with my married wife, though she was and still is very much simple and obliging. I did not ever follow my good mother's admonitions or warnings. Woman and drinking were the

only subjects of thought in my mind. But this sort of things could not continue for all times, and one morning in 1921, I had a violent shivering followed by high fever which rose up to 105.6°, and I got unconscious. Allopathic Doctors were engaged and they declared that I was running towards a bad type of Typho-Pneumonia. I do not remember anything about the course of the disease, and on the 26th day of it, I found myself lying too much wasted and enfeebled, with hardly any energy even to speak. My wife and my good mother had all along been attending by my side. By and by, I was well and took my natural and ordinary diets.

"Though ostensibly 1 got out of my serious illness, I persistently felt a sort of soreness and occasional stitching pains in my right front chest. Then I turned so much chilly that I felt as if I was constantly shivering, moreover, I was very much susceptible to cold and coryza, with a watery secretion from the nose,—the catarrh used to travel to the chest and to bring in difficulty of breathing, nausea, coughing, heat in the head, etc, etc. This susceptibility and intense chilliness increased on and on, I took to several physicians, both Allopathic as well as Kaviraji, but hardly any real relief could I obtain. Since March of this year (1925) I have been suffering from a low type of evening fever which is so consuming and wasting that I feel I am fast running towards my last days. Moreover, I have been getting bloody sputum off and on."

To my utter astonishment, I marked no trace of anxiety or fear in his face, rather be was still spending

most lavishly in lechery, and did not think of mending his ways. I gave him, as duty-bound, so many advices and instructions, regarding his manner of living, and asked him to obey his godly mother and dutiful wife. Even at this stage, he would not leave his ways of indulgence, and take to abstinence. My words did not seem to make any impression upon his mind, and I discharged him with a few doses of Kali carb 200 and only 2 doses of 1000. He did not follow my advice, nor did he send any report. I understood that he was determined to die and no body in heaven and earth could save him. After 3 months or so, his unfortunate old mother and his wife gave me a call during his last days and yet I gave him a dose of Tuberculinum bovinum, but to no effect. He died within a week.

*This case proves that *a patient cannot be cured unless and until he has the will to cure.*

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No. IV

## ARSENICUM IODATUM

Mr. Habibulla…..an M.A. class student of exceptionally good character, and of high and pure heredity, fell ill of a disease which had been declared Tuberculosis by more than three named physician of Dacca, came up to Calcutta for treatment in 1928, and took his admission into some of the Calcutta Colleges for getting the M.A. degree. A nice young man of amiable nature was found to have had many T.B. symptoms on, —so it was most unfortunate. He placed his case before one or two Allopathic Physicians of Calcutta and they all advised Calcium Injections. The patient would *not* take Injections any more, as he had taken many during his stay at Dacca, which had proved not only futile, but, as he said, brought in many untoward symptoms. He thought of trying Homœopathy and placed his case under the late illustrious Dr. Younan, and was under his treatment for 5 or 6 months, but no appreciable benefit was obtained. He then had been to some Allo-Homœo gentleman and was advised a few patent medicines along with infrequent doses of China 3x and Arsenicum album 3x. A fair trial was given but only a few trifles were removed without any the least improvement of his case. In July, 1930, he came up to me and placed his treatment under me, "as the last resort." I took down his symptoms and history of the case, as given below.

"I have always been sickly from my boyhood, though my appetite was all along very good,—nowadays for the last 3 to 4 years, I find a gradual emaciation continuing, and I do not know what this may be due to. The only thing that I find is that though I still eat a good deal, yet most of the food stuffs pass quite undigested. Frequent loose stools say, 3 or 4 times a day, I pass with particles of undigested matters mixed with my feces. This may be the cause of my wasting away. Profuse sweat comes out during night-sleep, which weakens me a good deal. I feel in the morning, as if I have been fasting for a long time, so much exhausted I become. Dry coughing is a torment to me, and though nothing comes up, yet I must have to cough and cough unless and until I get quite exhausted, I have noticed that any the slightest cold brings in coryza of the nostrils, making many raw and bleeding spots there, which shows that the nasal discharge, though mostly watery, is highly excoriating. A slow fever has commenced for the last few months, during afternoon and evening, rising up to 100° to the highest, which I am not much anxious about. The most tormenting symptoms are dry coughing and emaciation."

There was nothing, self-acquired or inherited. I searchingly enquired about the miasm and the cause of its oncoming into his system, but nothing did I find except vaccinations, repeated almost every year. Be that as it might have been, I asked the patient about some points with regard to his desires and aversions, and his likes and dislikes, and then closed up the

records. The replies were as given below.

'"I generally lie to the right, and though my sleep is almost naturally deep and sound, yet it is more often disturbed on account of my breathing inconvenience due to the closure of my nostrils, and so I must have to remove the crusts within my nostrils and then lie down again. I am full of fears and anxieties. I have a good appetite and I feel a goneness within my stomach which is tormenting and I must have to eat often. I like pungent things and sweets. Though I like cold bath, yet it seems to increase my coryza. Head pains are a constant feature with me. I must have rather hot things to eat but cold drinks, even ice-cold.

On the above totality, I selected Ars. iodatum and commenced with 200, every week and kept a pause after 4 such doses when improvement fairly appeared. After two months' pause, I rose up to 1000th Potency, which improved my patient in all other respects except his digestion. He turned rather tympanitic and constipated instead of being loose as formerly. I now thought of *Lycopodium* and gave it in 1000th, in two infrequent doses. This completed the cure. The detailed information during treatment cannot be given as the diary is not found now.

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No. V

## MEDORRHINUM

Dr. Harisadhan Sadhu-khan, M.B., an inhabitant of Khulna, ordinarily practising in a village under that District, aged 35 or 36 years, had all along been suffering from cold and cough off and on, for the last 14 or 15 years. Several methods of treatment were tried, but the strong susceptibility to cold, coryza and cough did not lessen; moreover, it went on increasing and increasing all along. The gentleman though an Allopath, did not ever try his own pathy save and except, under the advice of a few of his friends, Cod Liver oil and 4 to 6 phials of Sanatogen. First of all, he tried Kaviraji which of course gave him much benefit, but *the susceptibility* would not go away, The Doctor now came to understand that there must have been something wrong within his system, otherwise he could not account for so much tenacity of his case. As anything like a permanent relief was not forthcoming, he thought of trying Homœopathy and as one of his relations had got cured of his Insanity at my hands sometime before, the patient fixed up to come to me and place his case under my treatment. This case was a very confusing one, and I had an awful difficulty in arriving at the proper curative remedy, after a good deal of failures and disappointment and with a good deal of anxiety on the part of the patient. First of all, I give below the description of the case in the patient's own words.

"I am both hot and chilly. My worst suffering is during the night. Vehement mucous sound in the chest with asthmatic breathing, without any relief in any position except a bit on lying with a pillow pressed over the chest and abdomen. The warmth of the bed highly aggravates, even during winter and cold days, Winter and rains also aggravate in the way of my more frequently taking cold and coryza than in summer. I am wasting day by day. Frequent cold and coryza, and after 2 or 8 days, the breathing difficulty, and then when all the accumulated mucus comes out, a pause for a few days, and then again a new attack and so on, this is the condition I have been suffering from for the last 15 or 16 years.

"Vehement flushing and hot feeling almost always, with a special aggravation in the afternoon, I have been suffering for a long time from loss of memory, which is rather quite unusual in this age,—I cannot re-collect even the names of the dearest of my friends, and I wonder how can I forget such familiar names. However, I am, at present, not at all anxious for it,—the only thing is the wasting along with the chest symptoms which must have to be cured first of all and then you may think of curing the forgetfulness. Doctor, I feel an awful burning in the palms and soles, specially during sleep, and so long as I am in bed,—but during the day-time I feel rather coldness, specially in my feet. I feel, of course, very occasionally back-pains, specially in the small of my back. So much so, that after sitting for some time, I cannot rise at once and straighten up

and move along; but I feel it easier after small movements.

On cross examination,—"I do not like cold bath, nor can I stand it,—I take a tepid bath, which is rather refreshing. I must have to move along, because anything like rest aggravates my mental condition. I got my sputum examined and they say, it is all right, nothing abnormal is found. I do not know why should I suffer in the way. I like sweets very much, and then salty foods. I like winter, though I cannot tolerate cold. I fear the night, as asthmatic condition aggravates at the time. I took one or two specific "asthma-cures" of my self-prescription, but a friend of mine warned against using those things."

Upon the above totality of the symptoms as stated above, I gave him *Sulph* 1M. and though I waited for more than a month and repeated another dose of the same remedy in 1M, but not any the least benefit was forth-coming. I was very sure of my prescription, and so I gave *Sulph* 10M, but yet to no effect. The patient got rather quite anxious, and I gave *Tuberculinum bovinum* 1M, which also failed. Then, I thought there must have been some mistake in my taking up the case, and so, I asked the patient to come to me. Really I did not take any information regarding *heredity* and now I enquired about this: "The cat was out of the bag," as I came to know that his father suffered for a long time from Rheumatism, which was the result of *Gonorrhœa suppression,* and died of paralysis

Now having got the key, I gave Medorrhinum 1000, in two doses, and the result was simply astounding, not only to me but to my patient as well. He said, "I never felt so much easy chest before, under any treatment or anything. Absolutely free chest, Doctor, etc." After a month or so, I observed a break-down, and I had to repeat another dose of the same patency. It also goodly acted. After two months more, the work of the dose seemed to exhaust and a single dose of 10M was given. This dose cleared up the case, so much so, that I thought that it should be the last dose that was necessary, but I had to give another dose of 10M about 6 months after the first dose of 10M. The cure was complete.

*Medorrhinum cases generally look like *Sulphur* ones, because there are many symptoms common to both. But where the history shows that the *Sycotic* current comes down from the heredity or from personal acquisition, Sulphur is quite insufficient to cope with the process. This I have seen in more cases than thirty or thirty-five. Of course, it must not be thought that Medorrhinum is the only remedy to be applied in the **T.**B. cases having the Sycotic origin, but there are a few other remedies, specially—*Ant. tart., Natrum sulph* and *Thuja* which helped me in the way of treatment.

The special feature of that type of T.B. is the *absence of hæmorrhage* of any form.

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No. VI.

## KALI CARB, CARBO VEG,

## AND

## TUB. BOVINUM

Dr. Nihar Chandra. Bhoumic, L.M.S. of Ishanpur, Faridpur, aged about 35 years, practising in his own village, had been suffering from what he himself and his fellow practitioners had declared to have been Lung-phthisis. The history and condition of the patient given by himself are stated below.

"I have been suffering from various difficulties with regard to my respiratory organs from my boyhood. During my career as a student in the Calcutta Medical College, my sufferings aggravated and Dr…… M.B., of the Staff advised several patent medicines along with Cod-liver oil, which I took for months together for about a year. As the result of using all those, though *physically* I got much improved, but the real condition of my chest did not seem to change in any way. The revered Doctor re-examined my chest and lungs and asked me to go to some Specialist of Phthisis and I asked the advice of Dr……. Chatterji, M. D., who was of opinion that there was nothing as yet in the lungs to confirm Phthisis, but however a careful course of treatment must have to be

followed in order to ward off any undesirable consequence. He prescribed some medicines and advised me to change my diets and to change the climate as well, in case no palpable improvement is felt within three months from the date (4th Jan, 1918). To speak the truth, the result was not at all assuring and I had been to Simultola for a change, and remained there for six months after my graduation in the Medical College.

"Up to this time, I had a susceptibility to cold, and coryza with slight feverishness which would continue for 4-5 days together, and then I used to feel well for a period, and then again another attack of cold and coryza, and so on. After I came back from Simultola, I found to my surprise that this period during which I had formerly used to keep well, came to be shorter and shorter and towards the end of the year, 1918, I found myself *continuously* suffering from cold, coryza, cough, difficulty of breathing, and an *intense chilliness* in which *I could not get myself warmed up.* Always chilly and shivering. There were other symptoms as well, viz., feverishness, malaise, intense debility, soreness in the spine and small of my back, profuse sweating during night and morning. My old father got much alarmed and sent me again to a prominent Allopathic Physician of Calcutta, who fairly examined my chest and apprehended Lung-Phthisis. I also consulted physicians who declared in so many terms that I got the disease and was advised to take injections newly invented. Accordingly I took a series of "specific' injections consisting of 21 in course of 3 months' time—but unfortunately, to no improvement, the debility rather

increasing all the time. Now I determined to leave Allopathy altogether and take my chance in Homœopathy. One of my kinsmen, Sj. Ishan Chandra. Chakravarti, B.L., who got his son treated by you under almost similar circumstances, with success, kindly suggested your name and so I intend to give charge of my case to you. This is my final attempt."

I examined his chest and found alarming condition there, specially in the right front and back. The patient complained of sharp stitching pains all over the side. Low fever, almost during all times of the day, a bit aggravated during night. Severe chilliness and aggravation from the slightest cold were the special features. Anxiety for his own self and for the poor old father was most prominent and was rather depicted upon his look. The patient felt with every breath a most uncomfortable soreness all over the chest, more specially over the right, for which he could not lie to the right at all. He said, he had an attack of right-sided pleurisy in 1909, which was treated Allopathically, and since then he felt a sore spot there. Cough, mostly loose, sometimes dry. Sputum,—muco-purulent, but never bloody.

7-6-18.—Upon the totality of symptoms, I fixed upon Kali carb, but the main difficulty which I brooded over within my mind, was the aggravating nature of the remedy; but having had no other alternative than to administer the remedy which was quite fit according to the totality and condition of the case, I put three consecutive graduated doses of 200th in three mornings and watched the results. It was found that no general

aggravation followed, but only profuse expectoration after easy fits of coughing continued for a fortnight and ceased. No perceptible improvement was felt save and except an easy and a bit comfortable condition of the chest.

23-6-18,—Kali carb 1M was given just in the above way, and a sharp aggravation was seen in the way of extreme-difficulty of breathing, so much so that the poor patient could not lie down for 3 days together. "Yet, I feel comfortable" was the utterance with which he accosted me on the 28th. From the first of the following month, he was decidedly better and the improvement was general continuing for about a month. On the 25th. of July, 1M was repeated, and again a course of relief without any the least initial aggravation, came in. It was in the middle of September, that I had to think of giving 10M, which did not bring in any relief, and I do not know why. However, on the 12th Oct. I gave a single dose of C.M. potency of Kali carb, which brought in a perfect cure of the patient, so far as his chest symptoms were concerned. There was no coughing, no chilliness, no fever. But one thing I marked that there was the *susceptibility* to cold, though of a lesser degree. It was a time when there was high heat at Dhanbad and the patient having complained of flushing and accumulation of winds in his Intestines, I thought of complementing with *Carbo veg* and I gave in 200th and 1000th but to no effect whatever, and after about 2 months and a half, the patient wrote to me by his peon—"I am, at present in the same condition as you saw me in December last. But save and except the frequent

cold catching (though less frequent than before), I can say that under your auspices, I am a healthy man, etc., etc."

3rd April, 1919, I gave *Tuberculinum bov.* 1M, and four months after, another dose of 10M. These two single doses of the remedy removed the susceptibility "most wonderfully." The Doctor was advised to live at Dhanbad for the whole year of 1919, because the excellent climate of the place would bring him immense benefit. As a matter of fact, by the end of the year, he was altogether a new man.

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No. VII.

## AURUM MET AND SYPHILINUM

Sj. Viswarup Mahajan aged 33 or 34, a rice tradesman of Jharia, Manbhum, was brought under my treatment during the time when I was at Dhanbad, in 1922, August. It was a *typical case* of Tuberculosis, fully illustrating the principle that Insanity and Lung-Phthisis are only the two faces of the same coin of Tuberculosis, and are interchangeable.

So far back as in 1914, the patient had an attack of Insanity, first for a few days only, then for a period of 6 months or so had a *lucid interval,* but for the second time, he developed insane symptoms again of a deeper nature. In the first time, there was a good deal of roaming nature manifested, but in the later outburst, the patient turned extremely dull, silent and of apparently brooding nature. However, some "specifics" for insanity were used and he was "cured" for the time, and this condition continued up till 1919, when in the month of July of that year, he was down with right-sided Pleurisy which was treated Allopathically. He had to suffer for about two months and then recovered. Since then he felt a dull sore sensation with occasional stitches over the pleuritic spot inside, and occasional application of 'Anti-Phlogistine' and a few other anodyne ointments used to somehow give him a relief. A maddening

headache gave him much trouble. In 1921 winter, he found to his surprise that he turned so much chilly and susceptible to cold that he was getting nasal coryza and chest catarrh, repeatedly, so as to have been suffering from a continuous infiltration of the lungs with cough. By and by a feverish feeling commenced. The patient now sought the help of an Allopathic Physician of very good name and fame,—Dr. Roy in the coal field, who thoroughly examined his chest and declared the case to have been lung-phthisis, though still in a curable condition. Dr. Ghose openly and frankly advised him to place himself under my Homœopathic treatment, as the renowned Doctor clearly confessed that Allopathy would be quite powerless to arrest the onward process of the disease at this stage. The good Doctor was also pleased to write a letter to me, with which the patient called at my place at Hirapore, Dhanbad, and took me to Jharia. I recorded his case, on the 15th of August, 1922. I need not dwell upon the history of his case, as I have already related as above. I simply give below his records in brief, touching upon the vital matters in relation to his case.

"Mental condition—extremely irritable and deep melancholic. Most of the time, appeared to have been absorbed in deep reverie, and any interference by any body in the family would inflame him, even to violence. So much melancholic that he frequently desired death. His wife said that during his insanity for the second time, he attempted suicide even for three times, but now he desires death, sometimes strongly.

"In 1910 or 1911, he contracted Syphilis and took specific Injections from some eminent Allopath of Jharia. In 1913 or so, got enlargement of liver, and Allopathic and Kaviraji treatment set him right. Since then, he used to complain pain and sorenesss in the heart region, which also is said to have been enlarged by Dr. Ghose and Dr. Mitra. Of course, every malady was duly treated, either Allopothically and by a good Kaviraj of Katrasgarh. A reserved, rather, a sad and taciturn attitude commenced from about 1914 or so (not exactly remembered by his wife.)

"Present condition,—Intense head-pains aggravating at night which was less frequent than formerly. Ulcerations in both the nostrils from which thick and tough crusts used to come out, the smell of which was sickening. Those crusts were of such a horrible stench that the patient himself could not bear it. Right chest was sore and full of pains during breathing specially, when it was felt heavy. Perspiration profuse and offensive, aggravating during night in bed. There were two very disagreeable and inconvenient predicaments, which the patient piteously requested to be removed, viz., he could not remain without open air, but his head-pains used to seriously aggravate if it was uncovered in the least. Then again, if he would cover the head, most horrible orgasms would at once kill him, so much hard breathing and intense restlessness along with the condition would ensue.

"No appetite, but sometimes voracious. Thirst much more than ordinary, sweat also profuse and offensive, specially during night in bed."

What I marked as the special feature of the case, was the deep sadness and despair,—a deplorable condition of the mind. He was a moneyed man, having had enormous riches, and had the most flourishing trade, as that was rather the hey-day of the collieries.

On the 17th of August, 1922, I made a careful study of the case which was so much deep and complicated,—-and I arrived at Aurum meta, which was given in 200th, daily a dose at about 9 A.M. for 4 days. I waited for a fortnight, but to no appreciable benefit. I rose up to 1M, which was given in four graduated doses. I observed his mental improvement in course of two weeks with an appreciable relief regarding respiratory symptoms. The offensive nature of the discharges was also changed, and I waited upon the doses, up to 21st of October, after which date I found the improvement stagnated and so 1M was repeated in the same number of graduated doses as before. The benefit commenced again and continued for the whole of November and a few days of December too. I waited and waited in order to see if further benefit would appear. But no, and so I re-studied the case.

On 7-1-23, I found that the picture of the same remedy was there, and so I gave 10M, a single dose. On 23-2-23, the whole body of the patient was found to have been full of Syphilitic eruptions which were characteristically without itching. I waited till 2-5-23, and the patient was much improving with regard to his lung symptoms and lung condition, even he commenced to get a bit fatty, depression and weakness also much

decreased, but the susceptibility was there as before and he used to get cold and coryza rather more than before. Upon all these I put a dose of *Syphilinum,* 10M on 4-5-23.

Within a fortnight, his Syphilitic ulcer returned and he got much nervous to find that the disease which he got "cured" after so much expense and efforts, had returned. I tried to convince him but to no purpose, and he might have escaped from my hands and sought for getting it suppressed from elsewhere, but for his good and intelligent wife who did not allow him to do so. Within 2 months he himself understood that it was all for his benefit, and the dire susceptibility much decreased, so much so that the attacks of coryza were very few and far between. I did not give him any medicine whatever, and he was quite well by the August of the year.

I had to give him occasional doses of *Merc sol* in medium potencies during the next year, for other complications. But so far as the Tuberculosis was concerned, he needed no further medication.

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No. VIII.

## CARBO ANIMALIS AND BACIL.

Srimati Bijali Rekha Debi, wife of a Subordinate Judge of Patna, aged 32 years, had been suffering from a dry teasing cough, a type of slow fever with emaciation, accompanied with troublesome menses for a long while, though so-called treatment had all along been followed under good Allopathic hands, principally Hospital Assistant Surgeons, of different subdivisions of the District. The most alarming symptom of her case was the continued losing of flesh and energy, in spite of good food-stuffs and change of climates in different places. The husband was under the impression that Allopathy was the best or rather the only mode of treatment and if it could not succeed, nothing would. However, when it had actually failed in bringing about any change for the better, the gentleman sought the advice from the Vakils of the Bar there and some of them very strongly recommended my name. I was called in to go and see the case, and if possible, to take charge of it; all arrangements were made by a man sent by him to my Dhanbad house, in the month of November, 1926, when I was practising Law and Medicine there. The history and records given below will speak for themselves.

19-11-26—I examined the patient who was rather a thin stick of a woman, a moving figure, with hardly

any animation in her. She appeared to have been speaking with a good deal of effort, so weak and enfeebled she had been. It was a dry type of T.B. technically called consumption she had been suffering from. The Allopath also had declared it as T.B., and that there was no chance of recovery.

First of all, I examined her chest and lungs to see it there was any cavity or break-down anywhere there, but I found none. I made the records on that day, quotations from which are given in the following.

"My main troubles are chiefly, (1) dry and exhausting cough, aggravated on the slightest cold exposure; (2) intense weakness, *specially felt after any discharge, even urination*; (3) menstrual disorders, specially a high degree of *prostration after every mense-discharge,* however scanty it might be, though it is rather profuse in my case; and (4) palpitation on movement and sound. I must, first of all, tell you, my father, the whole history of my case.

"In 1919 or thereabouts, I had been terribly suffering from skin diseases, mostly of dry type, with intense burning and itching. The skin diseases actually started from long before, but they grew the worst that year. Before that I had a delivery, and I thought that the skin diseases had their origin from the various medicines I had to use, on account of the puerperal fever and diarrhœa just after the said delivery. However, the skin-diseases were wonderfully controlled by the use of a patent medicine named "Kandu-Dabanol", and since then I have been absolutely free from any sort of

skin-diseases. My menstrual troubles commenced also about that time, of course, a few years before the pregnancy; the main point with regard to my menses is the intense *weakness during and after the flow.* I desired to keep lying down all the time, so much weakness I feel at the time. Even when the flow was scanty, I do not feel that I get less weakness or exhaustion. Another symptom that I have during the menses, is the slight enlargement and soreness of my glands in the breasts which cannot be touched or moved at the time. Palpitation on the slightest movement I have been suffering from, even from my puberty. I have never been strong in my life, but now, for the last few years, I have all along been losing and losing. Every evening I must have a slight rise of temperature, between 99° and 100°, which cools off in the dawn.

"My father had a very uneasy and troublesome life. He had Pneumonia for more than dozen times and at last succumbed, when the physicians declared that he had T.B. My mother had Leucorrhœa as well as painful menses. I do not know any further history of my maternal or paternal families. My husband had or has no venereal disease of any type, though he is badly irritable.

"I do not enjoy bath. I feel an extreme debility, but I cannot rest anywhere for some time, and I must have to change the place very often. Appetite I have or a gone feeling in the stomach; but I am unable to eat as I do not find any relish in any food whatever, I want to remain rather alone and brood over my

misfortunes. Burning pains felt everywhere, specially, during the flow, in my uterus and private parts. Another thing that gives me much trouble is a feeling of rising of heat upwards, specially during sleep, and I get a copious sweat which is consuming, so to say. The other things I have told you as much as I can remember. I have become extremely chilly and debilitated."

Now after having studied the case most carefully, I concluded that a *carbon* must have to be used in the case, considering the extreme debility, orgasm,—yet chilliness, special weakness felt after discharges, however slight, palpitation on movement, etc. Though there was a history of suppression of skin diseases, yet the symptomatic picture having stood bold in the case for a *carbon,* I fixed upon *Carbo animalis* and it was given in 1M. on 25-11-26. Plenty of specially palliative or - soothing modicum doses was given as well.

On 12-12-26—a report come informing me that the last menses were less copious, and the extreme tenderness which had all along been felt in the glands of the breast during the time was much less; the· patient herself felt better than formerly. No medicine.

On 16-1-27,—another menses show further improvement of course, regarding the menses, but the teasing cough and slow rise of temperature went on steadily and persistently. The patient went on emaciating in her external features, but she seemed to eat better and to gain a bit in her strength. I began to make a further study of the case. Carbo ani. acted quite well and it was a deep-acting remedy and so I did not think of

repeating it, specially the symptom-totality for it was no more there. The case stood now in its clear consumptive form, and so, I thought, it must have to be met with a tubercular remedy according to the then picture. So I wanted to make a re-record of her case, and I got the following.

"I am far better. There is no more chilliness as I formerly had, except during the fever which I still have in the evening and night. I have been getting a true appetite now, and I have been eating better, yet, father, I have been rather losing flesh all the time. I think this fever is the cause of all this, I have hardly any anxiety for my case now, as I find I am getting better and better. No burning in my palms and soles. The burning that had been felt before is no more. I still have a dislike for cold bath. The restless nature is also continuing."

Though there was hardly any case for Sulphur, still I tried with the view of getting out, if possible, the suppressed skin-diseases. But I found that I made a mistake. I tried 1M and 10M of Sulphur but to no effect whatever, though I kept my patient upon it up to 23-5-27. Now I realised my error and gave a dose of *Bacil.* 1M on the date, and another graduated dose on the following day. The effect was simply wonderful. On 18-6, I found to my astonishment that my patient's body was full of bee-hive-like eruptions,—dry, moist, superficial, deep, somewhere oozing and weeping, somewhere sticky fluid accumulating,—in one word, of variegated nature of skin diseases.

The patient in the meantime was found to have without rise, the date having not been specially marked. The teasing dry cough was also no more.

On 10-7-27, I was again called in to see the patient who was all right regarding all her ailments except the skin diseases which were really very much troublesome, to say the least. The patient was found to have been gaining flesh and looked cheerful. "But the skin diseases must have to be prescribed for,"—was the prayer of my patient who was very mueh thankful to me. The prescription was only consoling words, and she agreed to suffer from the skin symptoms without any grudge. A dose of Bacil. 10M was required to be given to her on 10-8-27, and that was the last dose of the remedy. She got completely cured and her husband commenced to study Homœopathy which he found to be truly curative.

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## No. IX.

## ABROTANUM, CALC. PHOS, SILICEA

Sj. S.C. Mahalanabis, a student of the second year class, Ravenshaw College, Cuttack, came up to me with the recommendation from their worthy Professor Sj. Lakhmi Kanta Choudhury, M.A. in 1929, September. He had long been suffering from consumption, as declared by many of the worthy physicians of the old School and one Kaviraj too of good name. He gave me the following case and history. Aged 22 years and a few months; an inhabitant of Soro, Orissa.

"I have always been a weakling from the very early childhood. I heard from my father that I used to give him great troubles on account of my ill health and that not a week passed without some medicine in order to correct my disorders and tone me up. Cod Liver oil I have consumed more than a dozen every year and it was also besmeared over my body almost daily under the instruction of our physician. Apart from all this, various tonic medicines, medicines under prescriptions and during recent years, several Calcium Injections were taken; but the emaciation that commenced so early in my childhood did not abate in the least. I have had always a good appetite, but no nutrition from the

foods I take, though they are goodly nutritious. Of course, occasional diarrhœa comes in for a day or two, but I do not think that my emaciation was or is due to that. Something deeper must be there within my system which is the real cause, at least, I suppose so. The legs are so weak that I am quite unable to be standing or walking for any length of time, and they must ache and tremble.

I came to know from my mother that my navel used and continued to ooze a bloody serum up to the 4th year of my childhood and various medicines were tried; the navel healed up of itself, so I heard. I could not stand or speak for a long time and my dentition was also much delayed.

I feel a good deal of weakness in my spine. Life is of course there in me, but I feel that it flows in its lowest ebb, so much weak and enfeebled I am. There is hardly any joy up till now in my life. My bones are also thin, as you can examine yourself." ·

Cross-examined,—"I am extremely chilly, so much so that I cannot tolerate anything like a cold bath, which brings either cold and coryza or swelling of the tonsils. I have marked that the damp cold during the rains affects me more than the dry cold of winter, but I am not very much sure of this. I like meat most and I can tolerate it. I am all the time busy for nothing, because I cannot sit at rest though so much exhausted I am. Temper is rather irritated."

Upon the above totality, I fixed upon *Abrotanum,* in the light of his early symptoms of childhood as stated

above. I gave the remedy in 10M at once, in a single dose, on 3-10-29.

On the 5th of November, the patient came to my office, but I could not detect any appreciable change outwardly, though he said that he was feeling better than formerly. I repeated the same potency in four graduated doses to be taken in four consecutive evenings.

On the 12th December, he looked more cheerful and glowing,—the external appearance also gave an unmistakable evidence of internal improvement. Nothing given.

I was called in on the 2nd January, 1930 (the patient resided at the time at a house in the Raja Dinendra Street, Calcutta) and I found that he had, for some days back, been suffering from a slow type of fever, as an attending symptom of an abscess in his anal region. I at once caught the idea that it must turn into an anal fistula, a symptom which was the most beneficial indication of the process of his permanent cure. I tried to convince the patient in the way and somehow or other he promised not to interfere the abscess in any manner, by giving any external application or using the knife, or the like. I also wrote to Prof. Choudhury who is a true type of homœopath, and he also gave him the necessary instructions on the point. The region was most painful and tender, and so my patient had to suffer much during the time.

Towards the 15th or 16th January, the abscess burst of its own accord and a considerable quantity of blood and pus came out with a good deal of relief to my patient; so much so that he slept for two days

almost all the time except what was necessary for meals and answering of calls of nature. Nothing was given as medicine.

On the 4th February, I myself examined the spot and found it to have been a clean fistula as already apprehended by me. As for symptoms, nothing was found except a *constant chilliness and coldness* with *a profuse cold sweat* almost all the while, specially during the nights, Abrotanum symptoms were no more. I prescribed *Calc. phos.* 1M and waited for about a month. It was about the 2nd March that I could see the patient and he said that the discharge decreased and were decreasing. The tenderness was also much less than formerly. No medicine.

Up to the end of March, there was found no further improvement regarding the fistula, and Calc. phos. 10M was given in two doses, on 5-4-30. Though I waited for two months, yet no improvement was forthcoming. I then studied the case anew and saw the patient, and gave *Silicea 1M* on 14-6-30 and the effect was simply wonderful. The anal sinus commenced to discharge less and less and within a month or so, it almost ceased to flow. On 19-7-30, I repeated *Silicea* 1M, another dose, and the sinus healed up. Still it was found to ooze a very thin and a bit offensive fluid, every now and then; on 10-10-30, *Silicea 10M* was given, which made the cure complete. The patient looked cheerful and gay, and his youthful vivacity also returned.

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No. X.

## MANGANUM ACET

Sj. Keder Nath Sarma, aged 28 Years, an inhabitant of Bafo-Shibpore, near Calcutta, had been suffering from a low type of fever for the last nine months, came up to me for his treatment in January, 1929. There was a long previous history behind his present form of illness. He had long been in his maternal grand-father's house in a village in the district of Midnapur, where he had contracted Malaria in 1925. He took lots of quinine and quinine Injections too, apart from the various patent medicines prescribed by the Allopathic physicians from time to time. Since 1925, he was suffering off and on from the Malarial Intermittent type of Fever. In 1927, he came up to Calcutta for treatment, and it was for the first time that it was declared "Kala-azar" by the noted Allopathic physicians here, and he was given a few Kala-azar specific Injections and he seemed to have been all right for two months or so. Though the rise of fever was no more during the time, still he did not feel well, and the feverish feeling was all there, However, after those two months, the fever appeared again, and took a few more specific injections, but to no effect. Then, he could no more be persuaded to take Allopathic medicines, and gave the charge of his treatment to a *noted* Kaviraj of the town. but as ill luck would have it, the old type of Intermittent fever commenced to appear with full-fledged totality of symptoms, and the patient got terrified.

He again commenced with Allopathic treatment with indifferent effects. He was advised to repair to a good place for the purpose of change and he remained at Deoghar for six months and was all right except occasional rises of temperature. As soon as he came back, the old condition came back and he again went to Deoghar and remained there for sometime. But he now used to have a daily small rise attended with a dry cough and continued wasting of his body.

In 1928, when he was at Deoghar and thus suffering, his wife died of Cholera in his house at Baje Shibpore and he had to return. This bereavement gave him a deep shook and his disease symptoms rather aggravated. He placed himself again under the same Kaviraj. The result of a few months of treatment having not been of assuring nature, he now thought of Homœopathy, and for a few months towards the end of 1928, he took Homœopathic medicines under a good Homœopath of the place. However, in January, he came ·to me and the worthy doctor came along with him to give charge of his case, as he himself frankly confessed that he did not think himself fit for treating such a deep and complicated case as this.

Now, with regard to the present symptoms and condition,—"The slow fever and continued emaciation are my main factors. The fever that used to appear now and then, has become daily, and towards late in the afternoon. A dry teasing cough is tormenting,—no sputum comes out, simply the coughing is troublesome. I think my larynx is principally the seat of disease, as

I remember that a sort of laryngitis used to appear every now and then since my youth, specially, in cold damp climates. I cannot sit down and take rest for a while, because if I do so, I feel more anxious. Then again the cough troubles me during the day, but when I lie, I find an immediate relief of coughing and almost all troubles. Awfully profuse sweat towards the dawn every day, really consumes my body. My mind is full of fears, I am even terrified on a small sound and on the ordinary events happening. I think I am losing daily. Except during the night when I am lying on the bed, I am on the torment, not only for the disease-symptoms, specially the cough, but also my mental worry and anxiety. Every inch of my body is sore and painful.

"I am chilly and cannot stand cold, specially damp exposure. I never enjoy bath, though I take it every 2 or 3 days after and in tepid water. I do not like any special taste, but I think I like sweets more. I lie on my back. No heredity."

Upon the above totality, I gave him *Manganun aceticum* 1M, 2 doses on the 19th January, 1929. The effect was simply astounding,—the coughing which was the most tormenting torment, became less and less, and by the end of February, altogether ceased. The daily slow fever now became occasional. On the 15th March, I had to give another dose of the same potency, but it did not seem to act any longer. I gave a dose of 10M of the same remedy on the 10th April, which practically finished curing my patient having his disease process of

such a long standing nature. The patient asked my permission to re-marry and I joyfully gave it.

The reason why the action was wonderful is that the remedy was *truly symptomatic* and was quite similar all round. The mental feature and the modality were exactly similar. Then, again, there was no ultimation in the case, in form of cavity or ulceration.

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No. XI.

## CALC. CARB AND TUBER

Srimati Hiran Prova Debi, aged 23 or 24, wife of an Allopathic Physician of Ramgarh Colliery had been declared to have been suffering from T.B. symptoms for some time, and the husband himself with the aid of his Allopathic friends did as much could be done, but to no effect. She was brought to Dhanbad for a thorough treatment. A previous arrangement had been made for a house to keep her there for some time during the treatment. The husband took her to Dhanbad, and the record was made on 19th January, 1923. The husband's story as given below will show the nature of the case and treatment so long followed.

"My wife came to my house in her 11th year and menstruated in the following year. She had no mother when I married, and the father having died when she was 11, there was none to look after her and so I brought her so early and kept her under the care of my mother and sisters. She had a profuse menstruation for the first six months after the first show, and I gave a patent medicine which stopped her menses for about a year or so. My mother and my eldest sister suspected pregnancy and so no medicine was given. But no sign of pregnancy having been there, and a few disease symptoms having come, we thought of giving her medicines and so consulted the D-M-O. of B.N. Railway. We prescribed a patent medicine which did not do

much good. In the meantime, she was growing naturally and gaining flesh all the time, so we were rather careless for some time. In 1915, she began to have her menses, though very much scanty and full of pains during the flow. By and by I observed that though she had all along been gaining in flesh yet she felt exhausted and tired all the time. In 1916, she told me that the scanty flow was stopped and a white flow started instead. The Leucorrhœa was profuse, thick and was attended with itching of the genitals where a constant soreness was felt. The treatment was generally with patent medicine.

In January, 1918, she felt a hoarseness without any the least feeling in the throat,—I myself and my friends diagnosed it to have been laryngitis and treated it with paints and mixtures as well as patent medicines. She was gaining in flesh but losing in strength,—this was most prominent. She felt a great difficulty of breathing when ascending even a few steps. The laryngitis did not yield to our treatment. From her external look, it could not be supposed that she had any illness, but on account of her extreme tired condition, my mother got anxious and wanted me to bring her to Jharia for her treatment under the illustrious Dr, Ghose of Layabad Colliery. In July, 1819, she was brought to Jharia and her treatment arranged under the Doctor. The result was wonderful in course of six or eight months,—everything was all right except the hoarseness which, the worthy Doctor said, would go away by and by.

Up to March, 1922, she was almost all right, but the old symptoms returned, the hoarseness increased

and over and above, her right chest seemed to be affected, Coughing and sputum sweet to the taste were found. The same tiresomeness, absence of menstruation, dyspnœa, leucorrhœic flow, etc., etc., reappeared with occasional fever and heavy sweats for all times. The family grew extremely anxious. I came to Layabad to obtain instructions and prescriptions from Dr. Ghose. in Dec. 1922. This time, the worthy gentleman did not take up the case, but mentioned your name and advised me to place my wife under your treatment. He also frankly confessed that Allopathy would do no good, I have made a delay in bringing her to you. We shall live for some months at Dhanbad Bazar, simply for the convenience of your treatment."

On 19-1-23, I made the Case-record. Along with the above symptoms and troubles, I got a few others as put in below. Most of the constitutional symptoms were given to me on my enquiry about them.

"I am chilly yet I want open air, if not cold. I daily bathe in tepid water. I am quite averse to rains, because the damp cold I cannot tolerate at all. My chest symptoms commenced after the Allopathic treatment. Though the symptoms were removed by the treatment for some time, yet all along I did not feel well, rather more exhausted and weak I was feeling. At present all the symptoms are there over and above. I have got chest complaint with a great difficulty of breathing, specially on ascending even a bit of height. I lie to the sides and never on my back."

The patient looked pale and bloodless. Her mother died of puerperal fever with blood vomit as a complication. Father died of Diabetes.

Upon the above symptoms and conditions, I prescribed *Calc. carb.* every week a dose, six doses having been given altogether, to report after a pause of a fortnight after the 6th dose, 24-1-23. I did not dare give a higher potency for fear of aggravation as the patient was too weak to bear it.

On 20-3-23, a report came to inform me that only a bit of improvement in a general way was marked. A single dose of 1M of the same remedy was given. About the 16th of April, a healthy menstrual flow appeared almost without pains. The breathing difficulty was also felt less than formerly and the patient was cheerful. The laryngeal cough and other troubles were not much improved, and so another dose of the same potency was given on the 24th April. Though I waited till 19th May, no further improvement was found and so I re-studied the case and assured myself of the correctness of the prescription. On 20-5-23, I gave Calc carb, 10M, in a single dose. But I wondered that even the higher dose thus given could not make any the least impression upon her larynx. The husband though much satisfied with progress and general improvement of his wife, yet showed a bit of impatience as "the very plague-spot was not touched," as he said,

Now, I thought of interpolating *Tuberculinum bovinum* 1M, a single dose, which was given on 13-7-23, and

the result was simply magical. Within a fortnight or so, there came a wonderful change in the patient, so much so that the cough was no more and the dyspnœa was also altogether gone. On 29-9-28, a report came with a request to see the patient, and I wondered to find that she was a new woman. Her mother-in-law's joy knew no bounds. With folded hands she asked my permission to shift to Ramgarh now, and I gladly gave it. I fairly examined her chest and larynx, and found no disorder there. She felt much cheerful and healthy. Many members of our Dhanbad Bar took much interest in the case and they also were very glad that the patient got cured within so short a time.

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## No. XII.

## PHOS, SULPH AND TUBER

Md. Abul Fuzl, a poor clerk in the Jamadoba colliery, came to me for his treatment, after all other treatments, specially Allopathic, had failed. He had a persistent diarrhœa, technically called "atonic dyspepsia" for a long time, even from his boyhood, as he said. At present (in 1920) he was aged 25 years when he liked to come under my treatment. During his school days, he took *hakimi* medicines off and on, according to his own choice. He took service in the colliery for 5 years and since the beginning of his services, he had all along been taking Allopathic medicines under prescriptions of the Colliery Doctor and felt sometimes better and sometimes worse. Patent medicines he took plenty.

In 1917, he took a patent medicine for some months, with the effect that the usual number of his stools was far less than formerly, but he found to his surprise that he was very much susceptible to cold and nasal coryza, which by and by affected his respiratory organs with profuse infiltration, coughing and breathing difficulty. He related this thing to the Doctor who declared his disease to have been 'suspected T. B.,' and that he should think of changing the climate. As the patient was very much poor and needy, he rather got disappointed

and placed himself under the Hospital Assistant Surgeon of Dhanbad and went on tolerably well. There was, however, a break-down with a protracted hæmoptysis, in August 1919, and he then thought of changing the method of treatment and coming to me at Dhanbad, He got so much emaciated by this time, and that he took leave of his services for 6 months and placed his treatment under me. His symptoms and condition were as in the following when he came to me in February 1920,— 'I feel very much debilitated and exhausted and I feel as if I am daily losing my flesh and energy. I have been specially run down since the last blood-vomiting which appears at intervals. I also feel that, there is nothing inside my chest. I have become very much susceptible to cold, and frequent coryza appears with a low type of fever which remains unless and until the nasal secretions ripen and extend up to chest. A good deal of breathing difficulty is felt during the time, and the breathing becomes free when the infiltration is cleared up with coughing, hemming and hawking for days together.

"I lie more comfortably to the right and I cannot lie to the left. A good deal of cold water for drink I must have, even during the night, and I feel ice-cold water is better, but I do not get it, so very cold water I must have. Profuse sweat and profuse urine.

"My grandfather died of T.B., and one of my cousin-brothers was insane. I have not acquired venereal disease of any sort. I am full of fears and so I always like company."

Upon the above totality, I gave him *Phosphorus* lM, on the 15th February, in a single dose. It seemed to work nicely and a report for the better reached me towards the end of March. I waited up to 5th April when another blood-vomit appeared and on the 6th April I gave a dose of 10M, It also worked the same way, but the patient was not gaining in strength or energy. On the 20th May, the patient came to me and said he was not tolerating bath, yet he could not sleep due to intense burning all over his body, specially in his palms and soles. I gave a dose of *Sulph* 1M. which took away the burning only but the patient was where he had all along been. Moreover, another blood-vomit appeared on the 17th June more profusely than ever. The emaciation and slight fever continued and the patient was in every way found to have been running down and down.

Under this circumstance, I studied the case anew and thought that *Tuberculinum bovinum* was the· only help. I gave one dose of the remedy in lM. in three graduated doses on the 20th June and the following two days. The effect was all that could be desired. On the 18th July, a very scanty blood came out with the sputum twice and that was all. The patient continued to gain in strength. I had to repeat the remedy in 10M. on the 5th september and that was the last dose required in the case.

* I should draw the attention of my worthy readers as to the value of the remedy, Tuberculinum bovinum, as it will appear that it must have to be given in most

cases as *the finisher.* In fact, so far as my individual experience goes to show, this remedy may be said to be indispensably necessary in those cases which are, according to the symptoms, *tubercular* in nature. It has also been seen that there are cases which have no tubercular *symptoms,* but having the tubercular *flow* from the heredity, ordinary symptomatic remedies cannot fully cure unless complemented by this remedy. So I request my dear students and my beloved worthy brother practitioners to keep an eye to the valuable remedy, whenever the symptomatic remedies would not give happy and expected results.

* I could give thousands of tubercular cases, but it is not desirable that the bulk of the book should· be unnecessarily increased. Only the typical cases which should give my worthy readers a clear idea of the prescription and treatment, have been given. Moreover, the public demand for the book being very urgent, I could not make delay any longer in making it ready. If the book fortunately meets the public approval, more cases will be added in its future edition.

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# THERAPEUTIC HINTS

A Suggestion of Remedies for the main Disease Conditions as well as Particular Symptoms during the Developed stage of T.B.

Of course it cannot be denied that the totality of symptoms is the only guide in selecting the curative remedy, but circumstances occur when a particular symptom or condition must have to be specially attended to and remedied, otherwise the patient is found to come to a most inconvenient and sad predicament. In order to give a guide under such circumstances, some important remedies are suggested against those symptoms and conditions arising in course of treatment of T.B. cases. Still, the totality is to be looked to and should be taken help of as much as possible. In case of Euthanasia, the suggested remedies may more freely be used.

## 1. MAIN DISEASE CONDITIONS

CANCER—**Apis**, **Ars.**, *Ars. iod., Aur. ars., Bacil.,* Calc carb, Calc iod., *Carbo ani.,* Cistus cana., *Conium, Hydrastis cana.,* **Iod.**, Kali cyan., *Kali iod.,* **Kreosote**, *Lach,* Lapis alb., *Lyco.,* Medorrhinum, Phos, **Radium**, Sepia, *Silicea,* Thuja, **Tuber. bov.**

CONSUMPTION—**Ars**., **Ars. iod**., **Bacil**., Calc phos, **Iod**., Phos, Silicea, Syphil, **Tuber. bov.**

DIABETES (Insipidus)—*Acet. ac.,* Arg. meta., Aur. mur, Caust, *Gels,* Helon, Ignatia, Kali carb, Kali nit, Kreosote, *Lact. ac.*, Lil. tig., Lith. carb, Lyco., *Nat. mur,* Nitr. ac., Nux vom., **Phos. acid**, *Phos,* Sulph, **Tuber. bov.**

DIABETES MELLITUS (with Sugar)—*Acet. ac.,* Arg. meta., *Arg. nit,* Ars., Aur., *Ceanothus,* Fluoric ac., Helleborus, Iod., *Iris,* Kreosote, Lach, Lact. ac., Lyco., *Natr. sulph,* Opium, **Phos. acid**, Phos, *Silicea,* Sulph, *Tarant his,* **Tereb**., **Tuber. bov**.

INSANITY (Dementia)—Agaricus, *Anacardium,* Bell., *Calc carb,* Calc phos, Helleborus, *Hyoscyamus,* Ignatia, Lilium tig., Phos. acid, Phos, Picric acid, Sulphur, *Verat. alb, Tuber. bov.*

(MANIA)—**Anacardium**, Ars., Bell, *Baptisia, Hyoscyamus,* Lachesis, *Lyco., Nat. mur.,* Opium, Stramon., *Tarant. his, Verat. alb, Tuber. bov.*

(MELANCHOLIA)—*Agnus, Anacard.,* Arg. nit, Ars., **Aurum**, Calc carb, Cimicifuga, Helonias, *Ignatia,* Kali brom., *Lach,* Lil. tig., **Lyco**., **Nat. mur**., *Acid phos.,* **Platina**, *Puls.,* Sepia, Sulph, *Tarant. his,* Thuja, *Verat. alb.,* **Tuber. bov.**

GLANDULAR SWELLINGS—**Ars. iod**., *Aur. mur,* Baryta carb, **Baryta iod**., *Bromatum, Calc carb, Calc fluor, Calc iod.,* Carbo ani., Cistus, Clematis,

**Conium**, **Iodin**, *Kali iod.,* Lachesis, Lapis alb., *Lyco. Merc. sol., Phytolacca,* Silicea. **Spongia**, Sulph, *Tuber. bov.*

GANGRENE—Apis, **Ars**, Bromat, Calendula, **Carbo ani.**, **Carbo veg.**, *Crotalus,* **Kreosote**, *Lachesis,* **Secale**, **Sulph**, *Tarant. cub.,* **Tuber. bov.**

LEUCODERMA—Ars., *Ars. iod., Nat. mur,* **Medorrhin**, *Nitric acid,* Zinc.

LEPROSY—*Anacardium, Ars.,* Chalmugra, *Hydrocotyle, Lachesis,* Merc. sol., Secale, Sepia, *Silicea,* Sulph, **Tuber. bov**, **X-ray**.

NECROSIS AND CARIES—Arg meta., *Ars,* **Asafœtida**, *Aur. iod., Aur. meta., Calc fluor,* Calc phos., *Calc silicate,* **Fluoric acid**, Hepar, Iodin, *Kali bi., Kali iod.,* Lachesis, *Merc. sol., Nit. acid, Silicea,* **Syphilinum**, *Tuber. bov.*

RING-WORM—*Ars,* **Bacil.**, Calc carb, Calc iod., *Graphites,* Lyco., *Mezereum,* **Psorin.**, Rhus tox., **Sepia**, Sulph, *Tellur.,* **Tuber. bov.**

(2) SYMPTOMS DURING THE DEVELOPED STAGE OF TUBERCULOSIS.

TUBERCULOSIS:—

(1) PULMONARY—Ars., *Ars. iod.,* **Bacil.**, *Calc. ars, Calc. carb,* Calc. iod., *Calc. phos,* Crotalus, Drosera, Ferr. phos, **Iodin**, **Kali carb**, Kreosote,

Lachesis, *Lyco.,* Millefolium, Nitric ac., *Phos,* Sanguinaria, *Silicea, Spongia,* **Stannum**, **Tuber. bov**.

(2) LARYNGEAL—Ant. tart, *Arg. meta.,* **Arg. nit.**, *Calc carb,* **Calc iod**., Carbo veg., Causticum, *Drosera,* Hepar, Iodin, Kali bi., Kali carb, **Kali iod.**, **Lachesis**, Mang. acet., Merc., Phos, Selen., *Stannum, Spongia,* Thuja.

BREATHING:—

(a) RATTLING—*Ammon carb.,* Antim. ars., **Antim. tart**, Bromatum, Calc carb, **Carbo veg**., Chelid., China, Dulcamara, *Hepar,* Ipecac, *Kali bi.,* **Kali carb**, Kali sulph, *Lyco.*, **Nat. sulph**., Opium, Phos, Puls., Senega, Stannum, *Sulph.*

(b) SAWING—*Bromatum, Iodin,* Sambucus, *Spongia,* **Tuber. bov.**

(c) SIGHING—*Calc phos, Digitalis, Gels.,* **Ignatia**, **Lachesis**, Opium, *Sambucus.*

(d) STERTOROUS—**Ammon carb**, Arnica, Bry., China, **Hydro. acid**, *Naja, Nat. sulph. Opium,* Secale.

(e) SUFFOCATING—*Ant. tart.,* Apis, Ars., Cactus, *Calc carb,* China, Digitalis, Guaiacum, *Hepar*, *Hydro. acid, Ipecac,* Kali bi., **Lachesis**, **Lyco**., Merc, *Moschus,* Naja, Sambucus, *Spongia,* Sulph, *Tuber. bov.*

(f) WHEEZING—*Ammon carb,* **Ant. tart**., Ars., Carbo veg., Card. m., Hepar, *Iodin., Ipecac,* Kali bi., **Kali carb**, *Lyco.,* Sambucus, *Spongia.*

COUGH—Acetic ac., *Alumina, Ambra, Ammon. carb,* Ant. tart., *Ars., Ars. iod.,* Bell., Bry., Calc carb, Carbo veg., Cina, Coccus, *Conium,* Corallium, *Drosera,* Hepar, *Hyoscyamus, Iodin., Ipecac,* Kali bi., **Kali carb**., **Lachesis**, **Lyco**., **Mang. acet**. *Merc. sol*, *Naja,* Nit. ac., Nux vom., *Phos.,* Reumex, Sanguinaria, Senega, Silicea, *Spongia, Stannum,* Stann. iod., Sticta, Sulph, *Tuber. bov.*

COUGH HARD AND DRY—*Alumina,* Ammon carb., *Ars., Bell., Bry.,* Calc. carb., *Causticum, Conium,* Corallium, *Hyoscyamus, Ignatia, Iodin.,* Lachesis, Lyco., Phos., *Reumex,* Sticta, *Tuber. bov.*

COUGH LOOSE, GAGGING AND CHOKING—Ant. tart., *Bromatum,* Calc carb, Dulcamara, *Hepar, Ipecac. Kali carb,* Kali sulph, Lyco., Merc. sol, *Nat. sulph,* Stannum, Sulph, *Tuber. bov.*

DISCHARGE OR EXPECTORATION:—

BLOOD STREAKED OR BLOODY—Acon., Arg. meta., *Arnica,* Ars., Bell., Bry., **Crotalus**, **Ferrum phos**, *Ipecac,* **Lyco**., **Millefolium**, **Nit. ac**., **Phos**, Rhus tox., Sulph, **Tuber. bov.**

PURULENT—Ant. iod., *Ars. iod.,* **Bacil**., Calc carb, **Carbo veg**., Hydrastis, *Kali bi.,* Kali phos, *Kreosote,* Lyco., Phos, **Psorin**., *Silicea, Stannum,* Sulph, *Tuber. bov.*

VISCID AND TENACIOUS—Alumina, *Ammon. carb, Ant. tart.,* Ars., Bry, Carbo veg., Causticum,

Coccus cacti, *Hydrastis,* Ipecac, *Kali bi., Kali carb,* Lachesis, Lyco., *Mang, Nat. sulph,* Sanguinaria, Senega, Silicea, *Stannum, Tuber bov.*

CHEST PAINS—*Ars., Bell.,* Bry., *Carbo veg. Causticum,* Kali bi., *Kali carb,* Kreosote, Merc. sol, **Nat. sulph**, Phos, Reumex, *Spongia,* Sticta, Sulph, *Tuber. bov.*

HOARSENESS—*Ammon. carb.,* Ant. crud., *Arg. meta.,* Arg. nit., Ars. iod, Arum, Bell., *Bromatum,* Bry., Carbo veg., *Drosera,* **Dulcamara**, Kali bi., Kali carb, *Mang. acet.,* Merc., Nit. acid, Phos, Rhus tox, Reumex, Selenium, *Spongia, Stannum,* Sulph, Thuja.

HÆMOPTYSIS—*Acal., Acon., Arnica,* Cactus, **Carbo veg**., *China,* Erig., *Ferrum phos,* Hamamelis, Hydrastis, *Ipecac,* Kreosote, Mellilotus, **Millefolium**, *Phos,* Sanguinaria, *Trill.,* Verat. vir., **Tuber. bov.**

DYSPNŒA—Acet. acid, Acon., *Ammon. carb,* Ant. ars., *Ant. tart., Apis*, Aralia, *Bacil.,* Bry., Calc. ars., *Carbo veg., Digitalis,* Ferrum meta., Hepar, *Ipecac.,* Kali bi. *Kali carb., Lachesis,* Lobelia, *Lyco.,* Merc. sulph., Nat. ars., **Nat. sulph**, Opium, Phos, Sambucus, Sanguinaria, Senega, *Spongia,* Stannum, Sulph, Zinc meta., **Tuber. bov**.

PLEURISY—Acon., Ant. ars., *Ant. tart.,* **Apis, Ars**., Bry., *Ferrum phos,* Iodin., **Kali carb**, Merc.

sol., **Nat. sulph**, Phos, Rhus tox., Senega, Spigelia, Sulph, *Tuber. bov.*

WEAKNESS AND DEBILITY—*Ammon. carb,* Arg. meta., Calc carb., *Carbo veg.,* Digitalis, Gels., *Iodin. Kali carb,* Phos. acid, Phos, *Psorin.,* Spongia, *Stannum, Tuber. bov.*

* The above suggestions of remedies must have to be meant as a *guide* only, but the whole patient, his picture, and the totality of his case, cannot be discarded, as has been repeatedly observed.

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# CONCLUSION

I have already given the idea that the cases of Tuberculosis in so many forms, are increasing in our society, specially in big towns, and cities,—it can be said that they are daily increasing. But it should not be thereby understood that I mean the *developed* cases only. Of course developed cases are also more and more to be found, but what I really mean is that the T. B. *diathesis* is becoming or has become a general feature. There is hardly a family at the present time, the members of which are quite unaffected with the diathesis in some way or the other. It is a deplorable state of things, and I have already dealt with the reasons behind it. We, as physicians under the divine method of Homœopathy, have a very deep responsibility on our shoulders because we, and we alone can really remedy this state of things. Our method is the *only one* that is curative. The indigenous system of Ayurveda. is also equally curative, but the pity is that people have no desire or liking for any of these two which are so highly and truly beneficial. They want more demonstrations and high-sounding pathological diagnoses and various types of so-called examinations of their excreta, and then the usual form of treatment with crude medicines, patent medicines and Injections. They can hardly be convinced about the truly curative principles. So it has become so difficult to do good to them, even if we sincerely want to serve them and cure.

The Tubercular diathesis is a thing which is very difficult to detect in many cases. I have given in the body of this Treatise the clues and symptoms which when present in a patient can assure you as to the said diathesis being present. But still I do not think that what I have given is exhaustive. With a. deep and scrutinising eye, you are to search for it if it is there, because if you delay, it will simply be allowing the diathesis to proceed on its way to development in any of the human organs. In most cases, it is the hereditary flow coming down from the ancestors. If any the least *wasting* is detected, you are to take care to see if the diathesis is there. Suppose, one has simply profuse sweat on the least mental or physical exertion, or during sleep; or suppose, somebody has the diarrhœa for two, three or four stools in the morning; or suppose he has profuse urinations; or suppose, somebody has an inordinate desire for masturbation or copulation; in all these cases you should *feel* the hands of Nature, and in case ordinary remedies according to the totality of symptoms present in those patients give only a temporary respite, but the deep *predisposition* is left untouched, you should not hesitate to conclude that the wasting nature must be owing to the Tubercular diathesis in the system and so some deeper and Tubercular remedy must have to be requisitioned, as Calcarea, Silicea, Tuberculinum bovinum, Bacillinum, etc.

Tubercular heredity is, of course the surest clue to the presence of the Tubercular flow in the progeny, and I would, even here, want to give you an instance

where nobody could even doubt the existence of the diathesis. A professor, of tubercular heredity, but otherwise a highly efficient and good-natured gentleman, came under my treatment when I was at Dhanbad, who had gone there on the pretext of a change of climate, as advised by some eminent physician of Calcutta. The disease was that his brain-power appeared to him to be continually failing and failing. Some 8 or 10 years back, he felt for the first time that be could not follow the reasoning as formerly and that in case he persisted to reason or argue, his brain would become hazy and he would stand confused. Since then the brain-power had been positively on the wane. All other functions of the Professor were quite natural and normal, save and except that he had for many years a sort of polyuria, so that he had to urinate almost every 2 or 3 hours during the day, and 2 or 3 times during sleep. Having carefully taken down his case, I gave him *Acid phos* in varied potencies but not to much effect. Then, I felt Nature's hands of *wasting.* I gave him *Tuberculinum bov.* from 1M to 50M, and you will wonder to know that a man of 35 years though he was, the full brain-power was restored to him. It was a Tubercular *diathesis* lurking in him, and you know all Acid phos cases, if not cured in time, have the tendency to bring in lung-phthisis in the end. So you are always to look *deeply* in every case, if you want to do public good sincerely and truly.

In the present day society, you will find an early propensity to masturbate, and to copulate. The girls also

are turning precocious, their sexual urge is coming so early as in the 9th year. I have seen lots of girls aged 9 to 11, having the fully developed youth and youthful signs. These are all signs of Tubercular process of waste. You cannot simply blame them. Of course, much depends on the system of education, company, environments, but these are only the *exciting* cause, the *true* or main cause underlying within and in the form of Tubercular diathesis. You are to look to this and remedy the state of things as early as possible, because delay may bring in what you want to avoid.

Last, though not the least, is the *mental* condition. The mind of a T. B. patient is out of harmony or out of tune with everything, with every man; nothing suits him, and he gets irritated on trifles. This is a great clue, and for a long time during the diathesis, even a faultless word upsets him. The highly irritated temper, restless mood, dissatisfaction with everything and everybody will give you the earliest clue to the in-lying diathesis, and the earlier you can detect, the better for the patient.

Lastly, you as physicians, should impress on the minds of your patients the efficacy of *Brahmacharya* or sexual discipline and *God-mindedness.* These two can still save if properly understood and deligently practised. But the difficulty is that a T. B. patient cannot be easily persuaded to take to those things which will benefit him. It will appear to you in many cases that your patient is not amenable to any good instructions conductive to his good. You know these patients are on the *Tamasic*

plane and so would not mind those things and would doggedly pursue their own inclinations. Still you should do as much as you can. For myself I know, when everything fails, prayer, if sincere, must succeed. A T. B. patient is rather doomed and so is not likely to follow the ways and means in relation to sexual discipline and prayer with a fervent mood. Self-conceit generally reigns supreme in his mind. Still much can be done if you commence mending him early as soon as the presence of diathesis is detected. Of course, the crude-minded readers may look askance at me and disbelieve the efficacy of prayers. But they will be convinced in course of time and experience, I know. Not a blade of grass moves without His will, and a patient cannot be cured unless He wills. Just fulfill the Law of Cure in all its particulars and if you fail, sincerely call in His aid, and you will succeed. I request all my brother Physicians and my Students to put the above to test and they will, I am sure, be convinced.

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